Case 16-16740 Doc 1	Filed 05/18/16	Entered 05/18/16 12:33:06	Desc Main
Fill in this information to identify your case:		age 1 of 73	
United States Bankruptcy Court for the:			
Northern District of: Illinois (State)			
Case number (if known)	Chapter you are filing under:		
	Chapter 7 Chapter 11 Chapter 12 Chapter 13		Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/15

The bankruptcy forms use *you* and *Debtor 1* to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use *you* to ask for information from both debtors. For example, if a form asks, "Do you own a car, "the answer would be *yes* if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	art 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name	Montise	
		First name	First name
	Write the name that is on	J	
	your government-issued picture identification (for	Middle name	Middle name
	example, your driver's	Brown	
	license or passport	Last name	Last name
	Bring your picture identification to your meeting with the trustee.	Suffix (Sr., Jr., II, III)	Suffix (Sr., Jr., II, III)
2.	All other names you		
	have used in the last	First name	First name
	8 years		
	Include your married or	Middle name	Middle name
	maiden names.		
		Last name	Last name
		First name	First name
		riist name	First name
		Middle name	Middle name
		Last name	Last name
3.	Only the last 4 digits of your Social	XXX - XX- <u>8898</u>	xxx - xx-
	Security number or	OR	OR
	federal Individual	9 xx - xx-	9 xx - xx-
	Taxpayer		
	Identification number (ITIN)		
	number (ITM)		

MontiseCase 16-16740 JDoc 1 Filed 05\$16416 Entered 05/18/16 (142:33:06 Desc Main Debtor 1 Page 2 of 73 Document Document **About Debtor 1:** About Debtor 2 (Spouse Only in a Joint Case): 4. Any business names I have not used any business names or EINs. I have not used any business names or EINs. and Employer Identification Business name Business name Numbers (EIN) you have used in the last 8 years Business name Business name Include trade names and EIN EIN doing business as names EIN EIN 5. Where you live If Debtor 2 lives at a different address: 7517 S Yale Ave Apt: 1E Number Number Street Street 60620 Chicago Illinois City State Zip Code City State Zip Code Cook County County If your mailing address is different from the one above, fill If Debtor 2's mailing address is different from yours, fill it in it in here. Note that the court will send any notices to you at this here. Note that the court will send any notices to this mailing mailing address. address. Number Street Number Street City Zip Code State City State Zip Code 6. Why you are Check one: Check one: choosing this Over the last 180 days before filing this petition, I have lived district to file for Over the last 180 days before filing this petition, I have lived in this district longer than in any other district. in this district longer than in any other district. bankruptcy I have another reason. Explain. (See 28 U.S.C. §§ 1408.) I have another reason. Explain. (See 28 U.S.C. §§ 1408.)

Part 2: Tell the Court About Your Bankruptcy Case 7. The chapter of the Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form **Bankruptcy Code** B2010)). Also, go to the top of page 1 and check the appropriate box. you are choosing to Chapter 7 file under Chapter 11 Chapter 12 Chapter 13 8. How you will pay the ☑ I will pay the entire fee when I file my petition. Please check with the clerk's office in your local fee court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order... If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay Your Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. 9. Have you filed for No. bankruptcy within the last 8 years? Yes. District Case number District Case number District ____ When Case number MM / DD / YYYY 10. Are any bankruptcy ✓ No. cases pending or being filed by a Yes, Debtor Relationship to you spouse who is not When District Case number, if known filing this case with you, or by a Debtor Relationship to you business partner, or When District Case number, if known by an affiliate? 11. Do you rent your ✓ No. Go to line 12. residence? Yes. Has your landlord obtained an eviction judgment against you and do you want to stay in your residence? ✓ No. Go to line 12.

this bankruptcy petition.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with

MontiseCase 16-16740 J Doc 1 Filed 05#18/16 Entered 05/18/16/12:33:06 Desc Main Debtor 1 Page 4 of 73 Document of the Document of th Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole ◪ No. Go to Part 4. proprietor of any full- or part-time Name and location of business business? Name of business, if any A sole proprietorship is a business you operate as an Number Street individual, and is not a separate legal entity such as a corporation, partnership, or LLC. If you have more than City State Zip Code one sole proprietorship, use a Check the appropriate box to describe your business: separate sheet and Health Care Business (as defined in 11 U.S.C. § 101(27A)) attach it to this petition. Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate deadlines. Chapter 11 of the If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of operations, cash-flow **Bankruptcy Code** statement, and federal income tax return or if any of these documents do not exist, follow the procedure in 11 U.S.C. § 11 16(1)(B). and are you a small business debtor? No. I am not filing under Chapter 11. For a definition of No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the small business debtor, Bankruptcy Code. see 11 U.S.C. § Yes. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. 101(51D). Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have ◪ No. any property that poses or is alleged Yes. What is the hazard? to pose a threat of imminent and identifiable hazard to public health or If immediate attention is needed, why is it needed? safety? Or do you own any property that needs immediate attention? Where is the property? For example, do you Number Street own perishable goods, or livestock that must be fed, or a building that needs urgent

repairs?

State

City

Zip Code

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Explain Your Efforts to Receive a Briefing About Credit Counseling

You must check one:

15. Tell the court whether you have received briefing about credit counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1: About Debtor 2 (Spouse Only in a Joint Case):

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion. Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment

plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credi
counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be

unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to

Active duty. I am currently on active military duty in a

military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit counseling because of:

Incapacity. I have a mental illness or a mental

deficiency that makes me incapable of realizing or making rational decisions

about finances.

Disability. My physical disability causes me to be unable to participate in a briefing in

person, by phone, or through the internet, even after I reasonably tried to

Active duty. I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

MontiseCase 16-16740 J Doc 1 Filed 05/18/16 Entered 05/18/16 (12:33:06 Desc Main Page 6 of 73 **Answer These Questions for Reporting Purposes** 16a. Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) 16. What kind of debts as "incurred by an individual primarily for a personal, family, or household purpose." do you have? No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts. 17. Are you filing under No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that Yes. I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available to distribute to unsecured creditors? after any exempt property is excluded ✓ No. and administrative ר Yes. expenses are paid that funds will be available for distribution to unsecured creditors? **√** 1-49 1,000-5,000 25,001-50,000 18. How many creditors 5,001-10,000 50,001-100,000 50-99 do you estimate that 10,001-25,000 More than 100,000 you owe? 100-199 200-999 **✓** \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 19. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your assets \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion to be worth? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion \$0-\$50,000 \$1,000,001-\$10 million \$500,000,001-\$1 billion 20. How much do you \$50,001-\$100,000 \$10,000,001-\$50 million \$1,000,000,001-\$10 billion estimate your \$100,001-\$500,000 \$50,000,001-\$100 million \$10,000,000,001-\$50 billion liabilities to be? \$500,001-\$1 million \$100,000,001-\$500 million More than \$50 billion Part 7: Sign Below I have examined this petition, and I declare under penalty of perjury that the information provided is true For you and correct. If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. x /s/ Montise Brown Signature of Debtor 2 Signature of Debtor 1 Executed on 5/18/2016 Executed on MM / DD / YYYY MM / DD / YYYY

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page.

X

I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

rrect.		·
/s/ Elizabeth Placek Signature of Attorney for Debtor	Date	5/18/2016 MM / DD / YYYY
Elizabeth Placek Printed name		
Semrad Law Firm		
Firm name 20 S. Clark Street		
Street 28th Floor		
Chicago	Illinois	60603
City	State	Zip Code
Contact phone		Email addresseplacek@semradlaw.com
Bar number		State

<u> Case 16-16740 Doc 1 - Filed 05/18/16 - Entered 05/1</u>8/16 12:33:06 - Desc Main Fill in this information to identify your case: Debtor 1 Montise Brown First Name Middle Name Last Name Debtor 2 (Spouse, if filing) First Name Middle Name Last Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (If known) Check if this is an amended filing Official Form 106Sum Summary of Your Assets and Liabilities and Certain Statistical Information 12/15 Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new Summary and check the box at the top of this page. **Summarize Your Assets** Your assets Value of what you own 1. Schedule A/B: Property (Official Form 106A/B) \$0.00 1a. Copy line 55, Total real estate, from Schedule A/B..... \$4,072.00 1b. Copy line 62, Total personal property, from Schedule A/B \$4,072.00 1c. Copy line 63, Total of all property on Schedule A/B..... Summarize Your Liabilities Your liabilities Amount you owe 2. Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) \$7,222.00 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D 3. Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) \$15,571.00 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F...... \$17,479.00 3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F...... \$40,272.00 Your total liabilities Summarize Your Income and Expenses 4. Schedule I: Your Income (Official Form 106I) \$4,499,56 Copy your combined monthly income from line 12 of Schedule I.....

5. Schedule J: Your Expenses (Official Form 106J)

Copy your monthly expenses from line 22, Column A, of Schedule J.....

\$4,642.00

Debtor 1 MontiseCase 16-16740 J Doc 1 Filed 05/100/16 Entered 05/100/16 (ib.2):33:06 Desc Main
First Name Document Page 9 of 73

Answer These Questions for Administrative and Statistical Records

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?

No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Yes.

6. Are you filing for bankruptcy under Chapters 7, 11, or 13?											
	No. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.										
	✓ Yes.										
7. V	What kind of debt do you have?										
	Your debts are primarily consumer debts. Consumer debts are those incurred by an individual primarily for a personal, family, or household purpose. 11 U.S.C. § 101(8). Fill out lines 8-10 for statistical purposes. 28 U.S.C. § 159.										
	Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Cl this form to the court with your other schedules.	heck this box and submit									
8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from C Form 122A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	Official	\$2,074.24								
9.	Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:										
	From Part 4 on Schedule E/F, copy the following:	Total claim									
	9a. Domestic support obligations (Copy line 6a.)	\$15,471.00									
	9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$100.00									
	9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$0.00									
	9d. Student loans. (Copy line 6f.)	\$0.00									
	9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$0.00									
	9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	\$0.00									
	9g. Total. Add lines 9a through 9f.	\$15,571.00									

	Case 16-16740		Filed 05/18/16	<u>Entered 05/1</u> 8/16	12:33:06	Desc Main
Fill in this	information to identify your case:			L		
Debtor 1	Montise	J	Brown	1		
	First Name	Middle	Name Last N			
Debtor 2						
(Spouse,	if filing) First Name	Middle	Name Last N	lame		
United St	ates Bankruptcy Court for the:	Northern	District of II	linois		
Ornica Oil	ates bariktupicy Court for the.	NOTUTCHT		State)		
Case nun	nber		<u> </u>	, 		
(If known)						_
Officia	al Form 106A/B					Check if this is an
						amended filing
Sche	dule A/B: Prope	rty				12/
ategory vesponsib rrite your Part 1:	tegory, separately list and deso where you think it fits best. Be ble for supplying correct inform name and case number (if kno Describe Each Residenc u own or have any legal or equ	as complete an nation. If more s own). Answer ev ee, Building,	nd accurate as possible. I space is needed, attach very question. Land, or Other Rea	f two married people are filin a separate sheet to this form I Estate You Own or Ha	ng together, both n. On the top of a	are equally ny additional pages,
✓	No. Go to Part 2					
	Yes. Where is the property?					
			What is the property	? Check all that apply.		ecured claims or exemptions. Put
1.1	Street address, if available, or o	thar description	_ Single-family home	t .		y secured claims on Schedule D: Have Claims Secured by Property.
	Street address, if available, or o	ulei description	Duplex or multi-uni	ŭ		, ,
			_ Condominium or co	•	Current value of entire property	
			Manufactured or m	obile home		
	Number Street		_ Land		Describe the na	ature of your ownership
	Number Street		Investment property	!	interest (such a	s fee simple, tenancy by
	City State	Zip Code	Timeshare Other		the entireties, o	or a life estate), if known.
	Only Clark	2.p 0000	Ш			
				in the property? Check one.		is is community property
			Debtor 1 only		(see instru	ctions)
			Debtor 2 only			
			Debtor 1 and Debto	•		
			_	debtors and another		
			Other information yo property identification	u wish to add about this iten	n, such as local	
If you	own or have more than one, list he	ere:	property recommodule			
,			What is the property	? Check all that apply.		ecured claims or exemptions. Put
1.2	Oraș de Alexan V e a Paliferna	the second second section is	Single-family home	1		y secured claims on Schedule D: Have Claims Secured by Property.
	Street address, if available, or o	tner description	Duplex or multi-uni	t building		, , , , , , , , , , , , , , , , , , ,
			_ Condominium or co	operative	Current value of entire property	
			Manufactured or m	obile home		
	Ni wali au Otua at		_ Land			
	Number Street		Investment property	i	Describe the na interest (such a	ature of your ownership is fee simple, tenancy by
	011	7: 0: 1:	Timeshare Other			or a life estate), if known.
	City State	Zip Code			-	
			Who has an interest	in the property? Check one.	Check if the	is is community property
			Debtor 1 only	-	(see instru	
			Debtor 2 only			
			Debtor 1 and Debto	or 2 only		
			At least one of the o	lebtors and another		
			Other information yo property identification	u wish to add about this iten on number:	n, such as local	

Debtor 1	MontiseCase 16-167		Filed 05/18/16 Entered 05/18/16	# 142 :33: <u>06</u> De	sc Main	
1.3Stre	First Name Middle Name 1.3 Street address, if available, or other description		Documative Page 11 of 73 /hat is the property? Check all that apply. Single-family home Duplex or multi-unit building Condominium or cooperative	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?		
Nun	nber Street State	Zip Code	Manufactured or mobile home Land Investment property Timeshare Other	Describe the nature of interest (such as fee the entireties, or a life	of your ownership simple, tenancy by	
		Cot	The has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another ther information you wish to add about this item, s	(see instructions	ommunity property	
you ha		ion you own for all c e that number here	roperty identification number:			
Do you ov you own th 3. Cars, va	vn, lease, or have legal or eat someone else drives. If youns, trucks, tractors, sport utili	quitable interest in a lease a vehicle, also r	any vehicles, whether they are registered or not? In report it on Schedule G: Executory Contracts and Unexpes			
	Make Model: Year: Approximate mileage: Other information: Surrender Vehicle	Pontiac Grand Prix 2005 146000	Who has an interest in the property? Check one. ✓ Debtor 1 only ☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another ☐ Check if this is community property (see instructions)	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. Current value of the portion you own? \$1300.00	
3.2	Make Model: Year: Approximate mileage: Other information:		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	the amount of any secu	claims or exemptions. Put ured claims on Schedule D: Claims Secured by Property. Current value of the portion you own?	

Debtor 1	MontiseCase 16-16740 J Doc 1 First Name Middle Name	Filed 05/18/16 Entered 05/18/16 Document Page 12 of 73	്ഷ്മം33: <u>06 Desc Main</u>	_
3.3	Make Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?	
		Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions) er recreational vehicles, other vehicles, and accessor, fishing vessels, snowmobiles, motorcycle accessories	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?	
4.1	Yes Make Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?	
4.2	Make Model: Year: Approximate mileage: Other information:	Who has an interest in the property? Check one. Debtor 1 only Debtor 2 only Debtor 1 and Debtor 2 only At least one of the debtors and another Check if this is community property (see instructions)	Do not deduct secured claims or exemptions. Put the amount of any secured claims on Schedule D: Creditors Who Have Claims Secured by Property. Current value of the entire property? Current value of the portion you own?	
		II of your entries from Part 2, including any entries f	1 91300.00	

MontiseCase 16-16740 JDoc 1 Filed 05/16 Entered 05/18/16 /12:33:06 Desc Main Debtor 1 Page 13 of 73 **Describe Your Personal and Household Items** Part 3: Current value of the Do you own or have any legal or equitable interest in any of the following items? portion you own? Do not deduct secured claims or exemptions. 6. Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware П No ✓ Yes. Describe... Used Furniture \$450.00 7. Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music Nο Yes. Describe... (4) TV (1) Cellphone (1) Laptop (1) Tablet \$750.00 8. Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles **V** No Yes. Describe... 9. Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments **✓** No Yes. Describe... 10. Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment Yes. Describe... 11. Clothes Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories Yes. Describe... **Used Clothes** \$450.00 12. Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver No Yes. Describe... **Used Jewelry** \$350.00

13. Non-farm animals Examples: Dogs, cats, birds, horses **☑** No Yes. Describe... 14. Any other personal and household items you did not already list, including any health aids you did not list No Yes. Describe... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$2000.00 for Part 3. Write that number here

MontiseCase 16-16740 J Doc 1 Filed 05/18/16 Entered 05/18/16 Ak2i33:06 Desc Main Debtor 1 Document Page 14 of 73 **Describe Your Financial Assets** Current value of the Do you own or have any legal or equitable interest in any of the following? portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition ✓ Yes \$20.00 Cash: 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. ☐ No Institution name: Yes 17.1. Checking account: Chase Checking Account \$1.00 17.2. Checking account: Prepaid debit card \$1.00 17.3. Savings account: 17.4. Savings account: 17.5. Certificates of deposit: 17.6. Other financial account: 17.7. Other financial account: 17.8. Other financial account: 17.9. Other financial account: 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ✓ No Institution or issuer name: Yes

% of ownership:

19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in

an LLC, partnership, and joint venture

Yes. Give specific information about

Name of entity

✓ No

them

Debt	or 1	MontiseCase 16	-16740	JDoc 1	Filed 05#16/16	Entered 05/18/16	1k2w33: <u>06</u>	Desc Main
		First Name		Middle Name	Document not be a second of the contract of th	Page 15 of 73		
20.	Neg	otiable instruments in	clude person	nal checks, cas	gotiable and non-negot hiers' checks, promissory r nsfer to someone by signin	otes, and money orders.		
	✓	No						
		Yes. Give specific information about them	Issuer name	э:				
			_					
21.		irement or pension amples: Interests in IR/		eogh, 401(k), 4	.03(b), thrift savings accoun	nts, or other pension or profit-sha	aring plans	
		No	Type of acco	ount:	Institution name:			
	ш	Yes. List each account separately.	401(k) or sir					-
		, ,	Pension plan	•				
			IRA:	и.				•
			Retirement :	account:				
				account.	-			
			Keogh:	a a a unitu				
			Additional a					
22	Sec	urity deposits and p	Additional a					
ZZ.	Your Exa	share of all unused domples: Agreements was panies, or others	eposits you h	nave made so th	nat you may continue servic public utilities (electric, gas	e or use from a company , water), telecommunications		
	님	No			Institution name:			
	Y	Yes	Electric:		Security Deposit v	vith Landlord		\$750.00
			Gas:					
			Heating oil:					
			Security dep	posit on rental (unit:			<u> </u>
			Prepaid ren	t:				
			Telephone:					
			Water:					
			Rented furn	niture:				
			Other:					-
23.	Ann	uities (A contract for	a periodic pa	avment of mone	ey to you, either for life or fo	r a number of vears)		
		No				, , , , , , , ,		
		Yes	Issuer name	e and description	on:			

Debt	or 1	MontiseCa First Name	ise 1	<u>16-16740</u>	J Doc 1 Middle Name		<u>05⊭18/16</u> :umetht™e			6 (142433: <u>06</u>	Desc Main
24.				ation IRA, in a		a qualified	d ABLE progra	m, or under a	qualified stat	e tuition program.	
		No Yes	Institut	tion name and o	description. Sep	parately file	the records of a	ny interests.11	U.S.C. § 521(d	s):	_
25.		rcisable fo	r your		ts in property	(other tha	an anything list	ed in line 1), a	and rights or	powers	
26.	Еха		rights , net do				intellectual pro yalties and licens		is		
27.		enses, fran	chise ding pe	s, and other go			ssociation holdin	gs, liquor licen	ses, professior	nal licenses	
Mor	ney (or prope	rty o	wed to you	?						Current value of the portion you own? Do not deduct secured claims or exemptions.
28.	✓	you alı	pecific them, i	-	er					Federal: State: Local:	
29.	Exar	nily support mples: Past o		lump sum alimo	ony, spousal su	oport, child	support, mainte	nance, divorce	settlement, pro	perty settlement	
			pecific	information						Alimony: Maintenance: Support: Divorce settlement Property settlement	
30.	Exar	<i>nples:</i> Unpa	id wag al Secu	eone owes you ges, disability insurity benefits; un	surance payme		ity benefits, sick omeone else	pay, vacation pa	ay, workers' cor	mpensation,	

Debt	tor 1	MontiseCase 16 First Name	6-16740	J Doc 1 Middle Name	Filed 05#18/16 Document	<u>Entered</u> 05/4/8/h Page 17 of 73	16 /1k2:33: <u>06 D</u>	esc Main
31.		rests in insurance mples: Health, disabi		rance; health		credit, homeowner's, or rente	r's insurance	
	✓	No Yes. Name the insura of each policy and lis		,	Company name: Life insurance		Beneficiary:	Surrender or refund value: \$0.00
32.	If you		of a living trus		omeone who has died ceeds from a life insurance	e policy, or are currently entitle	ed to receive	
		Yes. Describe						
33.	Exar				u have filed a lawsuit or moce claims, or rights to sue	made a demand for payme	nt	
34.	to s	er contingent and o et off claims No Yes. Describe	unliquidated	claims of e	very nature, including c	ounterclaims of the debtor	and rights	
35.	✓	financial assets yo No Yes. Describe	u did not alre	ady list				
36.						ries for pages you have at		\$772.00
Part	5:	Describe Any B	susiness-R	elated Pro	operty You Own or I	lave an Interest In. Li	st any real estate ii	n Part 1.
37.	Do y	ou own or have an	y legal or equ	uitable inter	est in any business-rela	ed property?		
		No. Go to Part 6. Yes. Go to line 38.						Current value of the portion you own? Do not deduct secured claims or exemptions
38.	✓	ounts receivable or No Yes. Describe	commission	s you alread	dy earned			
39.		ce equipment, furn nples: Business-rela			nodems, printers, copiers,	ax machines, rugs, telephone	es, desks, chairs, electroni	ic devices
		No Yes. Describe						

	First Name	6-16740 J Doc 1 Middle Name	Filed 05/18/16 Document	<u>Entered</u>	6 ∂1 1 2333: <u>06</u> D	esc Main
40.	Machinery, fixtures, eq	uipment, supplies you us	se in business, and tools o	f your trade		
	✓ No					
	Yes. Describe					
41.	Inventory					
	✓ No					
	Yes. Describe					
42.	Interests in partnersh	ips or joint ventures				
	✓ No					
	Yes. Give specific	ļ	Name of entity:		% of ownership:	
	information about					
	them					
		•				
43 (Customer lists, mailing	lists, or other compilation	ns			_
.0.		note, or other complication				
	No No No your lists in	aluda parsapally identifiable	information (as defined in 1°	1118 C & 101/41 A\\2		
	103. Do your lists in	cide personally identifiable	illioittiatioti (as acililea ili 1	10.0.0. § 101(+174)):		
	☐ No					
	Yes. Desci	ibe				
44.	Any business-related p	oroperty you did not alread	dy list	<u>, </u>		
	✓ No					
	Yes. Give specific	-				
	information					
		-				
		-				
		-	t 5, including any entries t			
Part	6: Describe Any F	Farm- and Commercian interest in farmland, list it in	al Fishing-Related Pr Part 1.	operty You Own or H	ave an Interest In	
46.	Do you own or have a	ny legal or equitable inter	est in any farm- or comme	ercial fishing-related prope	erty?	
	✓ No. Go to Part 7.	-		•		Current value of the
	Yes. Go to line 47.					portion you own? Do not deduct secured
	_					claims
	_					or exemptions
47.	Farm animals Examples: Livestock, po	ultry, farm-raised fish				
		and j, rainin raioud non				
	✓ No					1
	Yes. Describe					

Deb	tor 1	MontiseCase 16-167 First Name	40 J Doc 1 Middle Name	Filed 05≰18/16 Document	<u>Entered</u> 05 Page 19 of 7	√1.8√1.6 (1.2.33: <u>06</u> 73	Desc	<u>Main</u>
48.	Cro	ps-either growing or harve	ested	Document	1 age 13 01 1			
	✓	No						
		Yes. Describe					_	
49.	Farr	m and fishing equipment, i	implements, mach	inery, fixtures, and too	ls of trade			
	✓	No						
		Yes. Describe						
50.	Farı	n and fishing supplies, ch	emicals, and feed					
	✓	No						
		Yes. Describe					_	
51.	Any	farm- and commercial fish	ning-related proper	ty you did not already	list			
	✓	No						
		Yes. Describe						
		e dollar value of all of you Write that number here						
Part		Describe All Property			That You Did Not	List Above		
53.		you have other property of mples: Season tickets, country		not already list?				
	✓	No						
		Yes. Give specific						
		information						
							Γ	
54. A	dd th	e dollar value of all of you	r entries from Part	7. Write that number h	ere		•	
		ŕ						
Part	8:	List the Totals of Eac	h Part of this F	orm				
55. F	Part 1	: Total real estate, line 2				>		
56. p	art 2	total vehicles, line 5		\$1300.0	nn			
57. P	art 3:	: Total personal and house	ehold items, line 15	·				
58. P	art 4:	: Total financial assets, line	36	\$772.00	_			
59. F	Part 5	: Total business-related p	roperty, line 45	<u>φ. 7.2.30</u>				
60. F	Part 6	: Total farm- and fishing-r	elated property, lin	ne 52				
61. F	Part 7	: Total other property not	listed, line 54					
62. 1	otal	personal property. Add line	s 56 through 61	\$4072.0	00			+ \$4072.00
						Copy personal property to	otal ▶	
62 T	otol -	of all proporty on Schodulo	A/D Add line <i>EE</i> :	ling 62				\$4072.00

		Case 16-16740	Doc 1	Filed 05/	18/16	Entered (<u> </u>	2:33:06	Desc Main
Fill i	n this inform	ation to identify your case:				J			
Deb	otor 1	Montise	J		Brown		_		
	_	First Name	Midd	le Name	Last N	lame			
	otor 2 ouse, if filing)	First Name	Midd	le Name	Last N	lame	_		
Unit	ed States Ba	ankruptcy Court for the:	Northern	[District of III	inois State)	_		
	e number nown)				(,	olale)	_		
Of	ficial F	orm 106C					<u>,</u>		Check if this is a amended filing
Sc	hedul	C: The Prop	erty Yo	ou Claim	as Ex	cempt			12/1
For is to exer rece exer prop	each iten o state a s mpted up eive certa mption of perty is d It: Ident Which set You ar	pecific dollar amount to the amount of ar in benefits, and tax-	aim as exem ny applicate exempt re exempt re to value und I that amou Claim as E laiming? Che nonbankrupto ons. 11 U.S.C.	mpt, you mu pt. Alternativ ble statutory tirement fun der a law that unt, your exe exempt eck one only, eve ey exemptions. 11 § 522(b)(2)	st specification of the state o	y the amoun may claim the me exemption be unlimited ne exemption would be limited by the course is filing with 122(b)(3)	ne full fair nons—such a d in dollar a no a partic ited to the a	narket value as those for mount. Hov ular dollar a	claim. One way of doing so e of the property being health aids, rights to vever, if you claim an amount and the value of the tatutory amount.
		ription of the property a lle A/B that lists this pro	perty the pown Copy	ent value of cortion you with the value from edule A/B		of the exemptic		Spec	ific laws that allow exemption
	Duint	Obaca Obackina							735 ILCS 5/12-1001(b)
	Brief description	Chase Checking Account		\$1.00	✓	\$	1.00	-	70012000712 1001(0)
	Line from Schedule A	√B: 17				φ 6 of fair market va cable statutory lir	lue, up to any		
	Brief			\$450.00		<u> </u>			735 ILCS 5/12-1001(b)
	description Line from	Used Furniture		9430.00	✓	\$45	50.00		
	Schedule A	/B: <u>06</u>				% of fair market va cable statutory lir			
3.	(Subject to	aiming a homestead exer adjustment on 4/01/19 and id you acquire the property	every 3 years	after that for case	es filed on o		• ,		

Debtor 1 MontiseCase 16-16740 J Doc 1 Filed 05/18/16 Entered 05/18/16 (Au2):33:06 Desc Main First Name Document Page 21 of 73 Part 2: Additional Page

Brief description of the property and line on Schedule A/B that lists this property		Current value of the portion you own Copy the value from Schedule A/B	Amount of the exemption you claim Check only one box for each exemption.	Specific laws that allow exemption
Brief description: Line from Schedule A/B:	Used Clothes	\$450.00	\$450.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(a)
Brief description: Line from Schedule A/B:	(4) TV (1) Cellphone (1) Laptop (1) Tablet	\$750.00	\$750.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Line from Schedule A/B:	Prepaid debit card	\$1.00	\$1.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Line from Schedule A/B:	Used Jewelry 12	\$350.00	\$350.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Line from Schedule A/B:	cash on hand	\$20.00	\$20.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Line from Schedule A/B:	Security Deposit with Landlord	\$750.00	\$750.00 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(b)
Brief description: Line from Schedule A/B:	Life insurance	\$0.00	✓ 100% of fair market value, up to any applicable statutory limit	735 ILCS 5/12-1001(f)

		Case 16-16740	Doc 1 Filed	05/18/16	<u> Entered 05/1</u> 8/	16 12:33:06	Desc Main	
Fill in t	this informa	ation to identify your case:			5		2 000	
Debto	r 1	Montise First Name	J Middle Name	Brown Last Nar	me			
Debto (Spous		First Name	Middle Name	Last Nar				
	l States Ba	ankruptcy Court for the: <u>No</u>	orthern	District of Illin	_			
	cial F	orm 106D le D: Creditor	rs Who Hav	ve Claim	s Secured	by Prope	am	eck if this is an ended filing 12/1
Be as corre	complect inform On the	ete and accurate as pomation. If more space top of any additional ditors have claims secured neck this box and submit this for	ossible. If two ma is needed, copy t pages, write your by your property?	rried people a the Additional name and ca	are filing together I Page, fill it out, r ise number (if kno	, both are equall number the entric own).	y responsible for	
Part 1		II in all of the information below	w.					
cl	aim. If moi	ured claims. If a creditor has re than one creditor has a par t the claims in alphabetical or	ticular claim, list the othe	er creditors in Part	2. As much as	Column A Amount of claim Do not deduct the value of collateral.	Column B Value of collateral that supports this claim	Column C Unsecured portion If any
c	onor Finar reditor's Na PO Box 18 Number	ame	Describe the propert		e claim:	\$7,222.00	\$1,300.00	\$5,922.00
C	vanston ity Vho owes	Illinois 60204 State ZIP Code the debt? Check one. 1 only	As of the date you fil Contingent Unliquidated Disputed		heck all that apply.			
	Debtor Debtor	2 only 1 and Debtor 2 only	An agreement you car loan)		nortgage or secured			
	another Check commi	one of the debtors and if this claim relates to a unity debt vas incurred 3/1/2016	Statutory lien (suc Judgment lien fror Other (including a	right to offset)	hanic's lien)			
		Add the dollar value of you here:			rite that number	\$7,222.00		

	Case 16-16740	Doc 1	Filed 05/18/16	Entered 05	<u>/1</u> 8/16 12:33:06	Desc	Main	
Fill in this inform	ation to identify your case:			. ago _o o				
Debtor 1	Montise First Name	J Middle	Browr Name Last N					
Debtor 2	riist ivaille	ivildale	iname Lastin	lame				
(Spouse, if filing)	First Name	Middle	Name Last N	lame				
United States Ba	ankruptcy Court for the:	Northern	District of II	linois State)				
Case number (If known)			(1					
Official Fo	orm 106E/F					Chec	k if this is an	amended filing
Schedu	le E/F: Cred	litors W	/ho Have U	nsecure	d Claims			12/15
party to any exection (196A/B) and on the care listed in Schools on the care o	and accurate as possible cutory contracts or unext Schedule G: Executory C edule D: Creditors Who I e left. Attach the Continu All of Your PRIORITY	pired leases tha Contracts and U Hold Claims Se ation Page to th	t could result in a claim Inexpired Leases (Offici cured by Property. If m nis page. On the top of	. Also list executor al Form 106G). Do ore space is neede	y contracts on <i>Schedu</i> not include any credito ed, copy the Part you no	le A/B: Proports ors with particed, fill it out	erty (Official ally secured , number the	I Form claims that e entries in
1. Do any cre	editors have priority unse	cured claims ad	gainst you?					
	o to Part 2.		,					
identify who possible, lis Part 1. If m	your priority unsecured c at type of claim it is. If a clair st the claims in alphabetical ore than one creditor holds planation of each type of cla	n has both priority order according a particular clain	y and nonpriority amounts to the creditor's name. If y n, list the other creditors i	, list that claim here a you have more than n Part 3.	and show both priority an	d nonpriority a	amounts. As n	nuch as
(i oi aii ex	nanation of each type of cla	iiii, see tile ilistic		instruction bookiet.)		Total claim	Priority amount	Nonpriority amount
D 1 II DEPT OF	F HEALTHCARE					\$15,471.00	\$15,471.00	\$0.00
Priority Cre	ditor's Name		Last 4 digits of a		1000	φ10,+71.00	φ10,47 1.00	
100 South G Number	Street		When was the d	ebt incurred?	9/1/2007			
				u file, the claim is:	Check all that apply.			
Springfield	Illinois	62704	Contingent					
City Who incur	State red the debt? Check one.	Zip Code	Unliquidated					
✓ Debtor			Disputed	· · · · · · · · · · · · · · · · · · ·				
Debtor	2 only		<u>~</u>	Y unsecured claim	:			
Debtor	1 and Debtor 2 only		= '	port obligations				
At least	one of the debtors and ano	ther		•	owe the government			
Check	if this claim relates to a c	ommunity debt	Claims for deal intoxicated	ath or personal injury	while you were			
	n subject to offset?	•		·				
✓ No								
Yes								
	of Revenue		Last 4 digits of a	ccount number		\$100.00	\$100.00	\$0.00
	ditor's Name artment of Revenue P.O. Box	¢ 64338	When was the d		n/a			
Number	Street		As of the date vo	u file the claim is:	Check all that apply.			
			Contingent	u me, me ciami is.	опеская тагарру.			
Chicago City	Illinois State	Zip Code	Unliquidated					
,	red the debt? Check one.	Zip Code	Disputed					
✓ Debtor	1 only			Y unsecured claim	:			
Debtor	2 only		<u> </u>	port obligations	•			
Debtor	1 and Debtor 2 only		= '	tain other debts you	owe the government			
At least	one of the debtors and ano	ther	=	ath or personal injury	_			
Check	if this claim relates to a c	ommunity debt		an or personal injury	wille you wele			
Is the clain	n subject to offset?		Other. Specify	'				
✓ No								
Yes								

Filed 05/18/16 Entered 05/18/16 (1/2):33:06 Desc Main MontiseCase 16-16740 JDoc 1 Debtor 1 Document Page 24 of 73 List All of Your NONPRIORITY Unsecured Claims Do any creditors have nonpriority unsecured claims against you? No. You have nothing to report in this part. Submit this form to the court with your other schedules. $\overline{}$ List all of your nonpriority unsecured claims in the alphabetical order of the creditor who holds each claim. If a creditor has more than one priority unsecured claim, list the creditor separately for each claim. For each claim listed, identify what type of claim it is. Do not list claims already included in Part 1. If more than one creditor holds a particular claim, list the other creditors in Part 3.If you have more than four priority unsecured claims fill out the Continuation Page of **Total claim** 4.1 Advocate Christ Hospital of Illinois \$2,500.00 Last 4 digits of account number Nonpriority Creditor's Name 4440 W 95th St When was the debt incurred? Street Number As of the date you file, the claim is: Check all that apply. Contingent Oak Lawn Illinois 60453 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only |√| Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Other. Specify hospital bill Is the claim subject to offset? **✓** No Yes 4.2 AMSHER COLLECTION SERV \$583.00 Last 4 digits of account number 5676 Nonpriority Creditor's Name 600 BEACON PKWY W STE When was the debt incurred? <u>7/1/</u>2015 Number Street As of the date you file, the claim is: Check all that apply. Contingent 35209 **BIRMINGHAM** Alabama Unliquidated City Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only ✓ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt 001 Collection; Collecting for ORIGINAL CREDITOR: DISH NETWORK Is the claim subject to offset? **V** Other. Specify _ **✓** No Yes 4.3 BANK OF AMERICA \$57.00 Last 4 digits of account number Nonpriority Creditor's Name POB 17054 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent WILMINGTON Delaware 19884 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed ✓ Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt

✓ No Yes

Is the claim subject to offset?

Other. Specify_

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irist Name Middle Name Document Page 25 of 73

Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.4 check N. Go \$288.00 Last 4 digits of account number Nonpriority Creditor's Name 7755 Montgomery Road # Suite 400 When was the debt incurred? n/a Number Street As of the date you file, the claim is: Check all that apply. Contingent Ohio Cincinnati Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Ⅵ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt Is the claim subject to offset? Other. Specify payday loan **✓** No ☐ Yes 4.5 Comcast \$250.00 Last 4 digits of account number Nonpriority Creditor's Name 11621 E. Marginal Way # 5 When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Washington 98168 Seattle Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Ͷ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts ✓ Other, Specify cable bill Is the claim subject to offset? No Yes 4.6 COMMONWEALTH FINANCIAL \$672.00 Last 4 digits of account number 13N1 Nonpriority Creditor's Name When was the debt incurred? 4/1/2014 Number Street As of the date you file, the claim is: Check all that apply. Contingent Unliquidated City State Zip Code Disputed Who incurred the debt? Check one. Type of NONPRIORITY unsecured claim: Debtor 1 only Student loans Debtor 2 only Obligations arising out of a separation agreement or divorce that Debtor 1 and Debtor 2 only you did not report as priority claims At least one of the debtors and another Debts to pension or profit-sharing plans, and other similar debts Check if this claim relates to a community debt 001 Collection; Collecting for ORIGINAL Other. Specify <u>CREDITOR: EMP OF CHICAGO LLC</u> **✓** Is the claim subject to offset? **✓** No Yes

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page After listing any entries on this page, number them beginning with 4.5, followed by 4.6, and so forth. **Total claim** 4.7 CREDIT MANAGEMENT LP \$461.00 Last 4 digits of account number Nonpriority Creditor's Name 4200 INTÉRNATIONAL PKWY When was the debt incurred? 11/1/2013 Number Street As of the date you file, the claim is: Check all that apply. Contingent CARROLLTON City 75007 Texas Unliquidated State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Ⅵ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Is the claim subject to offset? Other. Specify 001 UnknownLoanType **✓** No ☐ Yes 4.8 I C SYSTEM INC \$495.00 Last 4 digits of account number Nonpriority Creditor's Name PO BOX 64378 When was the debt incurred? 11/1/2012 Number Street As of the date you file, the claim is: Check all that apply. Contingent SAINT PAUL 55164 Minnesota Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Ͷ Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts 001 Collection; Collecting for ORIGINAL **✓** Is the claim subject to offset? CREDITOR: RCN Other. Specify No Yes 4.9 Illinois Department of Employment Security \$200.00 Last 4 digits of account number Nonpriority Creditor's Name 33 S State St When was the debt incurred? Number Street As of the date you file, the claim is: Check all that apply. Contingent Chicago Illinois 60603 Unliquidated City State Zip Code Who incurred the debt? Check one. Disputed Debtor 1 only Type of NONPRIORITY unsecured claim: Debtor 2 only Student loans Debtor 1 and Debtor 2 only Obligations arising out of a separation agreement or divorce that At least one of the debtors and another you did not report as priority claims Check if this claim relates to a community debt Debts to pension or profit-sharing plans, and other similar debts Other. Specify over payment from unemployment Is the claim subject to offset? |**~**| No Yes

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning	with 4.5, followed by 4.6, and so forth.	Total claim
4.10	John H. Stroger, Jr. Hospital of Cook County	Last 4 digits of account number	\$2,500.00
	Nonpriority Creditor's Name PO Box 70121	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Chicago Illinois 60673	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify hospital bill	
	✓ No		
	Yes		
4.11	PEOPLES ENGY	Look A digita of account number COF7	\$273.00
	Nonpriority Creditor's Name	Last 4 digits of account number 6257	
	200 EAST RANDOLPH Number Street	When was the debt incurred? 11/1/2011	
		As of the date you file, the claim is: Check all that apply.	
	CHICAGO Illinois 60601	Contingent	
-	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
		Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify InstallmentLoan	
	No	<u></u>	
	Yes		
4.12	Speedy Cash	Land A Parks of a complement	\$1,200.00
11.12	Nonpriority Creditor's Name	Last 4 digits of account number	Ψ1,200.00
	1931 N. Mannheim Rd Number Street	When was the debt incurred?n/a	
		As of the date you file, the claim is: Check all that apply.	
	Melrose Park Illinois 60160	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify payday loan	
	✓ No		
	Voc		

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Part 2: Your NONPRIORITY Unsecured Claims - Continuation Page

	After listing any entries on this page, number them beginning wi	ith 4.5, followed by 4.6, and so forth.	Total claim
4.13	Sprint	- Last 4 digits of account number	\$250.00
	Nonpriority Creditor's Name P.O. Box 219554	When was the debt incurred? n/a	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Kansas City Missouri 64121	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	Other. Specify phone bill	
	✓ No		
	Yes		
4.14	STUDENT LOAN FINANCE C	- Loot A digito of passint number	\$7,500.00
	Nonpriority Creditor's Name PO BOX 7860	- Last 4 digits of account number	
	Number Street	When was the debt incurred?n/a	
		As of the date you file, the claim is: Check all that apply.	
	MADISON Wisconsin 53707	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one.	Disputed	
	Debtor 1 only	Type of NONPRIORITY unsecured claim:	
	Debtor 2 only	Student loans	
	Debtor 1 and Debtor 2 only	Obligations arising out of a separation agreement or divorce that	
	At least one of the debtors and another	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts	
	Is the claim subject to offset?	✓ Other. Specify student loan	
	<u>✓</u> No		
	Yes		
4.15	US Cellular Nonpriority Creditor's Name	- Last 4 digits of account number	\$250.00
	Dept 0205	When was the debt incurred?	
	Number Street		
		As of the date you file, the claim is: Check all that apply.	
	Palatine Illinois 60055	Contingent	
	City State Zip Code	Unliquidated	
	Who incurred the debt? Check one. Debtor 1 only	Disputed	
	Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	Debtor 1 and Debtor 2 only	Student loans	
	At least one of the debtors and another	Obligations arising out of a separation agreement or divorce that	
	남	you did not report as priority claims	
	Check if this claim relates to a community debt	Debts to pension or profit-sharing plans, and other similar debts Other. Specify phone bill	
	Is the claim subject to offset?	✓ Other. Specify phone bill	
	Yes		

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Part 3: List Others to Be Notified About a Debt That You Already Listed

Dish Network			
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
9601 S Meridian E	Blvd		Line 4.2 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Stree			Part 2: Creditors with Nonpriority Unsecured Claims
Englewood	Colorado	80112	Last 4 digits of account number 5676
City	State	Zip Code	<u> </u>
RCN			
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
33 N LaSalle, Suite	e 1650		Line 4.8 of (Check one): Part 1: Creditors with Priority Unsecured Claim
Number Stree	et		Part 2: Creditors with Nonpriority Unsecured Claims
Chicago	Illinois	60602	Last 4 digits of account number 1001
City	State	Zip Code	
Speedy Loan			On which entry in Part 1 or Part 2 did you list the original creditor?
Name			<u></u>
2850 Belvidere Rd			Line 4.12 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Stree	et .		Part 2: Creditors with Nonpriority Unsecured Claims
Waukegan	Illinois	60085	Last 4 digits of account number
City	State	Zip Code	
Stroger Hospital o	f Cook County		On which cutturin Port 4 or Port 9 did you list the entitied one Proc
Name			On which entry in Part 1 or Part 2 did you list the original creditor?
1900 W Polk Stree	et		Line 4.10 of (Check one): Part 1: Creditors with Priority Unsecured Claims
Number Stree	t		Part 2: Creditors with Nonpriority Unsecured Claims
Chicago	Illinois	60612	Last 4 digits of account number
City	State	Zip Code	

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Part 4: Add the Amounts for Each Type of Unsecured Claim

6. Total the amounts of certain types of unsecured claims. This information is for statistical reporting purposes only. 28 U.S.C. §159. Add the amounts for each type of unsecured claim.						
			Total claims			
Total claims from Part 1	6a. Domestic support obligations.	6a.	\$15,471.00			
Hom Part I	6b. Taxes and certain other debts you owe the government	6b.	\$100.00			
	6c. Claims for death or personal injury while you were intoxicated	l 6c.	\$0.00			
	6d. Other. Add all other priority unsecured claims. Write that amount here.	6d.	\$0.00			
	6e. Total. Add lines 6a through 6d.	6e.	\$15,571.00			
			Total claims			
Total claims from Part 2	6f. Student loans	6f.	\$0.00			
from Part 2	6g. Obligations arising out of a separation agreement or divorce that you did not report as priority claims	6g.	\$0.00			
	6h. Debts to pension or profit-sharing plans, and other similar debts	6h.	\$0.00			
	6i. Other. Add all other nonpriority unsecured claims. Write that amount here.	6i.	\$17,479.00			
	6j. Total. Add lines 6f through 6i.	6j.	\$17,479.00			

Fill in this inform	Case 16-1674		5/18/16	5/18/16 12:33:06	Desc Main
	nation to lucitary your case	<i>5.</i>	J		
Debtor 1	Montise	J	Brown	_	
	First Name	Middle Name	Last Name		
Debtor 2				_	
(Spouse, if filing	First Name	Middle Name	Last Name		
United States B	Sankruptcy Court for the:	Northern	District of Illinois		
	. ,		(State)	_	
Case number				_	
(If known)					
Official	Form 106G				Check if this is a amended filing
Official	roilli 100G				arriended illing
Schedu	le G: Execut	ory Contracts a	and Unexpired	Leases	12/1:
	d, copy the additional p				ing correct information. If more onal pages, write your name and
1. Do you h	ave any executory	contracts or unexpired	leases?		
No. Che	eck this box and file this for	m with the court with your other	schedules. You have nothing e	lse to report on this form.	
✓ Yes. Fill	in all of the information be	elow even if the contracts or leas	ses are listed on Schedule A/B.	: Property (Official Form 106A	√B).
		npany with whom you have the nstructions for this form in the ins			
Persor	n or company with whor	n you have the contract or lea	ase	State what the contrac	t or lease is for
2.1 Pangea F	Real Estate			Other,	
Name				Other, Landlord	

PO BOX 809009 Number

Chicago City Street

Illinois State 60680 Zip Code

		Case 16-1674	n Doc 1 Filad ()5/18/16 Entered	NE/10/16 12:22:N6	Desc Main
Fill	in this inform	ation to identify your case		13/16/10 Filleten	03/10/10 12.33.00	Desc Main
De	btor 1	Montise	J	Brown		
De	btor 2	First Name	Middle Name	Last Name		
-	ouse, if filing	First Name	Middle Name	Last Name		
Un	ited States Ba	ankruptcy Court for the:	Northern	District of Illinois		
	se number (nown)			(State)	_	
						Check if this is a
\bigcirc 1	fficial F	Form 106H				amended filing
		e H: Your Co	ndobtore			404
						12/1s If two married people are filing
in th						e, fill it out, and number the entries ase number (if known). Answer
1.	Do you have No	re any codebtors? (If yo	u are filing a joint case, do no	t list either spouse as a codebto	or.)	
2.	Louisiana, N	levada, New Mexico, Pue	ived in a community prope erto Rico, Texas, Washington,	• •	unity property states and territon	ries include Arizona, California, Idaho,
		o to line 3. id your spouse, former sp	oouse, or legal equivalent live	with you at the time?		
	_ 🔄 ^					
	ΠУ	es. In which community s	tate or territory did you live? _	Fill in the	name and current address of th	at person.
		Name of your spouse, for	ormer spouse, or legal equival	ent	_	
		Number Street			_	
		City	State	Zip Code	_	
3.	as a codeb	tor only if that person i	s a guarantor or cosigner.	Make sure you have listed th		the person shown in line 2 again ficial Form 106D), <i>Schedule E/F</i> olumn 2.
	Column 1:	Your codebtor			Column 2: The creditor to	whom you owe the debt

Check all schedules that apply:

Fill in	n this information to identify	your case:	-4040 -		8/16 12	:33:06	Desc Mai	n	
Debto		Docui	Brown	.gc 33 01 1	3				
Debioi	First Name	Middle Name	Last Name)					
Debto						Check if this			
(Spous	se, if filing) First Name	Middle Name	Last Name)		=	nded filing		
United	States Bankruptcy Court for the:	Northern	District of Illinois (State				ment showing p s as of the follow		chapter 13
Case r (If knov	number wn)					MM / DD)/YYYY		
Offic	cial Form 106I								
Sch	edule I: Your Inc	ome							12/1
nforn ages	de information about you nation about your spouses, write your name and ca 1: Describe Employme	e. If more space is neede se number (if known). A	ed, attach a s	eparate sh					onal
	Fill in your employment information.		Debtor 1			Debtor 2			
		Employment status	✓ Employed			Employ	ed		
	If you have more than one job,		Not Employ	/ed		Not Em	ployed		
	attach a separate page with	Occupation	General Labor	General Labor					
	information about additional employers.	•	Nestle						
	Include part time, seasonal,	Employer's name				-			
	or self-employed work.	Employer's address	800 N Brand Bl Number Street	vd		Number Stree	et e		
	Occupation may include student								
	or homemaker, if it applies.		Glendale	California	91203				
			City	State	Zip Code	City	State	e Zip Code	е
		How long employed there?	4 months						
Part	2: Give Details About I	Monthly Income							
are se	nate monthly income as of the deparated.			-					-
-	or your non-filing spouse have mo parate sheet to this form.	re than one employer, combine th	ne information for		·			nore space,	attach
0	List monthly was		man mall		ebtor 1	For Debto			
	List monthly gross wages, salar deductions.) If not paid monthly, ca	Iculate what the monthly wage wo	ould be.	2	\$4,032.95				
3.	Estimate and list monthly overt	ime pay.	3	3	+ \$0.00				
4.	Calculate gross income. Add lin	e 2 + line 3.	4	1.	\$4,032.95				

Filed 05/18/16 Debtor 1 Montise Case 16-16740 J Doc 1 Entered @5/18/16 12:33:06 Desc Main Documentame Page 34 of 73 For Debtor 2 or For Debtor 1 non-filing spouse Copy line 4 here 4 \$4,032.95 5. List all payroll deductions: \$401.27 5a. Tax, Medicare, and Social Security deductions 5a. 5b. 5b. Mandatory contributions for retirement plans \$0.00 5c. Voluntary contributions for retirement plans 5c. \$0.00 5d. Required repayments of retirement fund loans 5d. \$0.00 5e. Insurance 5e. \$114.79 5f. Domestic support obligations 5f. \$261.00 5q. Union dues 5g. \$0.00 5h. Other deductions. Specify: 5h. + \$0.00 6. Add the payroll deductions. Add lines 5a + 5b + 5c + 5d + 5e + 5f + 5g + 5h. 6. \$777.05 7. Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. \$3,255.89 8. List all other income regularly received: 8a. Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total \$0.00 monthly net income. 8a. 8b. Interest and dividends 8b. \$0.00 8c. Family support payments that you, a non-filing spouse, or a dependent regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. \$0.00 8d. Unemployment compensation 8d. \$0.00 8e. Social Security 8e. \$0.00 8f. Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies 8f. \$0.00 8g. Pension or retirement income 8g. \$0.00 8h. Other monthly income. Specify: 8h. + \$1,243.67 9. Add all other income Add lines 8a + 8b + 8c + 8d + 8e + 8f +8g + 8h. 9. \$1,243.67 10. Calculate monthly income. Add line 7 + line 9. 10. \$4,499.56 \$4,499.56 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. 11. + \$0.00 Specify: 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. 12. \$4,499.56 Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? Yes. Explain:

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Part 1: Describe Employment

	Debtor 1			Debtor 2		
Employment status	Employed Not Employed			Employed Not Employed		
Occupation						
Employer's name	Bimbo Bakeries USA					
Employer's address	225 Stewart Road Number Street			Number Street		
	Wilkes Barre City	Pennsylvania State	18706 Zip Code	City	State	Zip Code
How long employed there?	6 months				_	

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Part 2: Give Details About Monthly Income

For Debtor 1	For Debtor 2 or non-filing spouse			
\$1,243.67				

8h.Other monthly income. Specify:

1. Bimbo Bakeries USA

Official Form 106l Schedule I: Your Income page 4

Fill in this inform	Case 16-1		Doc 1 Filed	05/18/16	Entered 05/1	8/16 12:33:06	Desc Mair	1
FIII IN UNIS INIOTTI	ation to identity ye	our case.			Ü			
Debtor 1	Montise First Name		J Middle Name	Brown Last N	amo			
Debtor 2	riist Name		Middle Name	Lastin	ame	Check if this is:		
(Spouse, if filing)	First Name		Middle Name	Last N	ame	An amended filir	ng	
United States Ba	nkruptcy Court fo	or the: No	rthern	District of Illi	nois	A supplement sh	nowing post-petitio	n chapter 13
Case number				<u> </u>	State)	expenses as of t	he following date:	
(If known)						MM / DD / YYY	Y	
Official F	orm 106	<u>3J</u>						
Schedule	J: You	r Expe	nses					12/1
						esponsible for supplyir		
information. If m (if known). Answ			another sheet to this	s form. On the t	op of any additional	pages, write your nam	e and case numb	er
Part 1: Desc	• •							
1. Is this a joint								
✓ No. Go t	o line 2							
Yes. Do	es Debtor 2 live	in a separat	e household?					
	No							
	Yes. Debtor 2 n	nust file Offici	al Forms 106J-2, <i>Expe</i>	enses for Separat	te Household of Debtor	2.		
2. Do you have	dependents?	No						
Do not list De	otor 1 and		out this information fo	r Depender	nt's relationship to	Dependent's	Does depend	dent live
Debtor 2.		each de	pendent		or Debtor 2	age	with you?	
				Child		7 years	☐ No. ✓ Yes.	
				Child		6 years	No.	
							✓ Yes.	
				Child		7 years	No.	
				0			Yes.	
				Child		11 years	☐ No. ✓ Yes.	
				Child		14 years	No.	
				Ohild		2	✓ Yes. No.	
				Child		2 years	✓ Yes.	
3. Do your expenses of	enses include people other	√ No						
than	people offici	Yes						
yourself and dependents	•	103						
Part 2: Estim	ate Your One	noing Mon	thly Expenses					
	-	<u> </u>		s voll are lieina	this form as a supple	ement in a Chapter 13 o	rase to report	
	a date after the					ox at the top of the for		
			overnment assistand chedule I: Your Incom				Yo	ur expenses
	r home owners! the ground or lot.		s for your residence.	Include first mort	gage payments and		4.	\$1,450.00
If not inclu	ded in line 4:							
4a. Real est	ate taxes						4a	\$0.00
4b. Property	, homeowner's, c	or renter's insu	ırance				4b.	\$20.00
	aintenance, repai		·				4c.	\$50.00
Official office ov	√ne6's association	or condomin	ium dues	Schedule J: Y	our Expenses		4d.	page 1 \$0.00

Debtor 1 MontiseCase 16-16740 J Doc 1 Filed 05/18/16 Entered 05/18/16 (1/2/33:06 Desc Main

Document Page 38 of 73 Your expenses 5. Additional mortgage payments for your residence, such as home equity loans \$0.00 5. 6. Utilities: 6a. Electricity, heat, natural gas \$350.00 6a. 6b. Water, sewer, garbage collection \$0.00 6b. 6c. Telephone, cell phone, Internet, satellite, and cable services \$350.00 6c. 6d. Other. Specify: \$0.00 6d 7. Food and housekeeping supplies \$1,200.00 7. 8. Childcare and children's education costs \$360.00 8. 9. Clothing, laundry, and dry cleaning \$175.00 9. 10. Personal care products and services \$175.00 10. 11. Medical and dental expenses \$100.00 11. 12. Transportation. Include gas, maintenance, bus or train fare. \$350.00 12. Do not include car payments 13. Entertainment, clubs, recreation, newspapers, magazines, and books \$0.00 13. 14. Charitable contributions and religious donations \$0.00 14. 15. Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance \$62.00 15a 15b. Health insurance \$0.00 15b 15c. Vehicle insurance \$0.00 15c 15d. Other insurance. Specify: \$0.00 15d 16. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. \$0.00 16 17. Installment or lease payments: 17a. Car payments for Vehicle 1 \$0.00 17a 17b. Car payments for Vehicle 2 17b \$0.00 17c. Other. Specify: \$0.00 17c 17d. Other. Specify: \$0.00 17d 18. Your payments of alimony, maintenance, and support that you did not report as deducted from \$0.00 your pay on line 5, Schedule I, Your Income (Official Form 106l). 18. 19. Other payments you make to support others who do not live with you. Specify: \$0.00 19. 20.Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property \$0.00 20a 20b. Real estate taxes 20b. \$0.00 20b 20c. Property, homeowner's, or renter's insurance \$0.00 20c 20d. Maintenance, repair, and upkeep expenses 20d. \$0.00 20d 20e. Homeowner's association or condominium dues \$0.00 20e

Debtor 1	MontiseCase 16 First Name	-16740 J Doc 1 Middle Name	Filed 05#16/16 Document	Entered 05/4/8/1/8	6@12:33: <u>06 Desc N</u>	<u>Main</u>
21. Othe i	Specify:		Document	r age 39 01 73	21	\$0.00
22. Calc	ulate your monthly ex	rpenses.				\$4,642.00
22a. /	Add lines 4 through 21.					\$0.00
22b. (Copy line 22 (monthly e	expenses for Debtor 2), if an	y, from Official Form 106J	-2		\$4,642.00
22c. A	Add line 22a and 22b. T	he result is your monthly ex	penses.		22.	
23.Calcu	late your monthly ne	et income.				
23a. (Copy line 12 (your com	bined monthly income) from	Schedule I.		23a	\$4,499.56
23b. (Copy your monthly expe	enses from line 22 above.			23b	\$4,642.00
		xpenses from your monthly	income.			(\$142.44)
	The result is your mont	thly net income.			23c	
24. Do y	ou expect an increase	e or decrease in your exp	enses within the year aft	ter you file this form?		
For	example. do vou expec	t to finish paying for your car	loan within the vear or do	vou expect vour		
		ase or decrease because o	,			
✓	No					
	Yes					
_	Explain here:					
	Ехріантного.					

	Case 16-16740	Doc 1 Filed 0	5/19/16 Entor	<u>ed 05/1</u> 8/16 12:33:06	Doce Main
Fill in this info	rmation to identify your case:		7/10/10 I IIIEIE	-1117.10/10 12.33.00	Desc Main
Debtor 1	Montise	J	Brown		
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse, if filing)	ng) First Name	Middle Name	Last Name		
United States	Bankruptcy Court for the:	Northern	District of Illinois		
Case number			(State)		
(If known)					
Official	Form 106Dec	<u>, </u>			Check if this is a amended filing
Declara	ition About an	Individual De	btor's Sched	lules	12/1
If two married	people are filing together,	both are equally responsil	ole for supplying correc	ct information.	
Part 1: Sig	l .				ars, or both. 18 U.S.C. §§ 152, 1341,
	Name of person		Attach Bankrupto Signature (Officia	ry Petition Preparer's Notice, Declar al Form 119).	ration, and
	enalty of perjury, I declare t are true and correct. ise Brown	hat I have read the summa	ry and schedules filed v	with this declaration and	
Signature	of Debtor 1		Signat	ture of Debtor 2	
Date 5/1 :	8/2016 M/DD/YYYY		Date	MM/DD/YYYY	

	information to identify y		oc 1 File	d 05/18/16	Entered 05/	18/16 12:3	3:06	Desc Main
Debtor 1	Montise		J	Brown				
5 1	First Name		Middle Name	Last Nar	ne			
Debtor 2 (Spouse,	if filing) First Name		Middle Name	Last Nan	ne			
United St	ates Bankruptcy Court fo	or the: North	ern	District of Illino	ois			
Case nun	nber			(Sta	te)			
. ,	al Form 107	 7						Check if this is a amended filing
	ment of Fin	_	ffaire fo	r Individua	le Filina f	or Bank	runto	G
								y 12/1 g correct information. If more
								f known). Answer every question
Part 1:	Give Details Abou	t Your Marita	al Status and	d Where You Live	ed Before			
1. W	hat is your current ma	rital status?						
Г	Married							
<u> </u>	4							
2. Du	ıring the last 3 years, h	nave you lived a	anywhere other	than where you live ı	now?			
		•	•	•				
	No							
_ _	No Yes. List all of the plac	es you lived in th	ne last 3 years. Do	o not include where yo	u live now.			
∠	_	es you lived in th	ne last 3 years. D	o not include where yo	u live now.			
<u> </u>	_	es you lived in th		tes Debtor 1 lived	u live now. Debtor 2:			Dates Debtor 2 lived there
□	Yes. List all of the plac	es you lived in th	Da	tes Debtor 1 lived		ebtor 1		
	Yes. List all of the place Debtor 1: 7252 S Spaulding Ave		Da the	tes Debtor 1 lived ere	Debtor 2:			there Same as Debtor 1
<u> </u>	Yes. List all of the place Debtor 1:		Da the	tes Debtor 1 lived ere	Debtor 2:			there Same as Debtor 1 From
<u> </u>	Yes. List all of the place Debtor 1: 7252 S Spaulding Ave Number Street		Da the	tes Debtor 1 lived ere	Debtor 2:			there Same as Debtor 1
<u> </u>	Yes. List all of the place Debtor 1: 7252 S Spaulding Ave Number Street Chicago III	inois 600	Da the	tes Debtor 1 lived ere	Debtor 2:		Zip Cod	there Same as Debtor 1 From To
	Yes. List all of the place Debtor 1: 7252 S Spaulding Ave Number Street Chicago III	inois 600	Da the	tes Debtor 1 lived ere	Debtor 2: Same as D Number Street	State	Zip Cod	there Same as Debtor 1 From To
<u> </u>	Yes. List all of the place Debtor 1: 7252 S Spaulding Ave Number Street Chicago III City St	inois 600	Da the	om 1/1/2010 12/1/2015	Debtor 2: Same as D Number Stree City Same as D	State ebtor 1	Zip Cod	there Same as Debtor 1 From To
	Yes. List all of the place Debtor 1: 7252 S Spaulding Ave Number Street Chicago III	inois 600	From To 629 o Code	om 1/1/2010 12/1/2015	Debtor 2: Same as D Number Stree	State ebtor 1	Zip Cod	there Same as Debtor 1 From To Same as Debtor 1
	Yes. List all of the place Debtor 1: 7252 S Spaulding Ave Number Street Chicago III City St	inois 600	Production of the state of the	om 1/1/2010 12/1/2015	Debtor 2: Same as D Number Stree City Same as D	State ebtor 1	Zip Cod	there Same as Debtor 1 From To Same as Debtor 1 From From From From From From

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First Name Middle Name Part 2: Explain the Sources of Your Income

4.	Did you have any income from employment Fill in the total amount of income you received f activities. If you are filing a joint case and you have the company of the compan	, including part-time	ider Debtor 1.				
		Debtor 1		Debtor 2			
		Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)		
	From January 1 of current year until the date you filed for bankruptcy:	✓ Wages, commissions, bonuses, tips☐ Operating a business	\$12755.27	Wages, commissions, bonuses, tips Operating a business			
	For last calendar year: (January 1 to December 31, 2015) YYYY	Wages, commissions, bonuses, tips Operating a business	\$4260.00	Wages, commissions, bonuses, tips Operating a business			
	For the calendar year before that: (January 1 to December 31,	Wages, commissions, bonuses, tips Operating a business	\$1972.00	Wages, commissions, bonuses, tips Operating a business			
	Did you receive any other income during this Include income regardless of whether that income benefit payments; pensions; rental income; intereand you have income that you received together, List each source and the gross income from each No Yes. Fill in the details.	e is taxable. Examples of other est; dividends; money collected list it only once under Debtor 1.	income are alimony; child su from lawsuits; royalties; and	gambling and lottery winnings.	· · · · · · · · · · · · · · · · · · ·		
		Debtor 1		Debtor 2			
		Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of income Describe below.	Gross income from each source (before deductions and exclusions)		
	From January 1 of current year until the date you filed for bankruptcy:						
	For last calendar year: (January 1 to December 31,						
	For the calendar year before that: (January 1 to December 31,	Unemployment	\$6,324.00				

Debtor 1 Montis Case 16-16740 J Doc 1
First Name Middle Name

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Part 3: List Certain Payments You Made Before You Filed for Bankruptcy

6.	Are ei	ther Del	otor 1's or	Debtor 2's	debts primarily con	sumer debts?					
	No.				tor 2 has primarily c usehold purpose."	onsumer debts. Cons	umer debts are defined in 11	U.S.C. § 101(8) as "incurre	d by an individual primarily		
		Durir	ng the 90 d	lays before y	ou filed for bankruptcy,	did you pay any credito	did you pay any creditor a total of \$6,425* or more?				
		П	No. Go to	line 7.							
			total	amount you	paid that creditor. Do	not include payments fo	more in one or more payment r domestic support obligation attorney for this bankruptcy ca	s, such as			
		* Suk	ject to adj	ustment on 4	/01/19 and every 3 yea	ars after that for cases fil	led on or after the date of adju	stment.			
	✓ Ye	s. Deb t	or 1 or De	ebtor 2 or b	oth have primarily c	onsumer debts.					
	_						r a total of \$600 or more?				
			No. Go to			,					
					raditar ta whom you be	oid a total of \$600 or ma	re and the total amount you p	aid			
			that	creditor. Do	not include payments		ligations, such as child suppo				
						Dates of payment	Total amount paid	Amount you still owe	Was this payment for		
	Ō	Creditor's	s Name						Mortgage Car		
	1	Number	Street						Credit card		
	-								Loan repayment		
	-	City		State	Zip Code				Suppliers or vendors		
		,			_μ				Other		
	Ō	Creditor's	s Name						Mortgage Car		
	1	Number	Street						Credit card		
	-								Loan repayment		
	-	Sits /		State	Zin Codo				Suppliers or vendors		
	,	City		State	Zip Code				Other		
	-	Creditor's	s Name						Mortgage		
	_	or ounor							Car		
	1	Number	Street						Credit card		
	=								Loan repayment		
	(City		State	Zip Code				Suppliers or vendors		
	`	,			p 3000				Other		

MontiseCase 16-16740 JDoc 1 Filed 05/16 Entered 05/18/16 /12:33:06 Desc Main Debtor 1 Page 44 of 73 Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. Yes. List all payments to an insider. Total amount paid Amount you still Dates of Reason for this payment payment owe family personal loan 12/30/2015 Tuesday Randle \$1500.00 \$0.00 Insider's Name 7517 S Yale Number Street Oak Lawn Illinois 60453 City State Zip Code Insider's Name Number Street City State Zip Code Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments that benefited an insider. Dates of Total amount paid Amount you still Reason for this payment payment owe Include creditor's name Insider's Name Number Street City State Zip Code Insider's Name Number Street City State Zip Code

Debtor 1 Montiscase 16-16740 J Doc 1
First Name Middle Name Filed 05/16/16 Entered 05/18/16 12:33:06 Desc Main

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	e you filed for bankru ncluding personal injur	ptcy, were you		uit, court action,			stody modifications, and cont
No Yes. Fill in the de	etails.						
		Nature	of the case	Court or	agency		Status of the case
Case title							Pending
Coop avanhan				Court Nar	ne		On appeal
Case number				Number S	Street		Concluded
				City	State	Zip Code	_
Case title							Pending
Case number				Court Nar	ne		On appeal
Case number				Number S	Street		Concluded
				City	State	Zip Code	_
			Describe the pro	norty			
			garnished 143 00			Date	Value of the property
STUDENT LO Creditor's Nam	OAN FINANCE C		garnished 143.00			Date 5/20/201	property
			garnished 143.00	weekly			property
Creditor's Nam	ne		Explain what ha	weekly			property
Creditor's Nam PO BOX 7860	ne		Explain what ha	weekly ppened repossessed.			property
Creditor's Nam PO BOX 7860	ne	53707	Explain what hap Property was Property was Property was	weekly ppened repossessed. foreclosed. garnished.			property
Creditor's Nam PO BOX 7860 Number Stre	ne	53707 Zip Code	Explain what hap Property was Property was Property was Property was Property was	ppened repossessed. foreclosed. garnished. attached, seized	or levied.	5/20/201	property 6 \$7500
Creditor's Nam PO BOX 7860 Number Stre	ne eet Wisconsin		Explain what hap Property was Property was Property was	ppened repossessed. foreclosed. garnished. attached, seized	, or levied.		property
Creditor's Nam PO BOX 7860 Number Stre	wisconsin State		Explain what hap Property was Property was Property was Property was Property was	ppened repossessed. foreclosed. garnished. attached, seized	or levied.	5/20/201	property 6 \$7500 Value of the
Creditor's Nam PO BOX 7860 Number Stre	wisconsin State		Explain what hal	repossessed. foreclosed. garnished. attached, seized	, or levied.	5/20/201	property 6 \$7500 Value of the
Creditor's Nam PO BOX 7860 Number Stre	wisconsin State		Explain what hap Property was Property was Property was Property was Property was	repossessed. foreclosed. garnished. attached, seized	or levied.	5/20/201	property 6 \$7500 Value of the
Creditor's Nam PO BOX 7860 Number Stre MADISON City Creditor's Nam	wisconsin State		Explain what hap Property was Property was Property was Property was Property was Explain what hap Property was	weekly ppened repossessed. foreclosed. garnished. attached, seized pperty ppened repossessed.	or levied.	5/20/201	property 6 \$7500 Value of the
Creditor's Nam PO BOX 7860 Number Stre MADISON City Creditor's Nam	wisconsin State		Explain what hal	weekly ppened repossessed. foreclosed. garnished. attached, seized pperty ppened repossessed. foreclosed.	or levied.	5/20/201	property 6 \$7500 Value of the

Debt	tor 1		i <u>led 05/18/16 Entered</u> 05/18/16/16 Document Page 46 of 73	2::33: <u>06 Descl</u>	Main
11.		hin 90 days before you filed for bankruptcy, did a punts or refuse to make a payment because you No	any creditor, including a bank or financial institution	, set off any amounts fr	om your
		Yes. Fill in the details.			
			Describe the action the creditor took	Date action was taken	Amount
		Creditor's Name	_		
		Number Street			
			Last 4 digits of account number: XXXX-		
		City State Zip Code	_		
		nin 1 year before you filed for bankruptcy, was ar iver, a custodian, or another official?	ny of your property in the possession of an assignee	for the benefit of credi	tors, a court-appointed
	V	No Yes			
Part	 5:	List Certain Gifts and Contributions			
13.			you give any gifts with a total value of more than \$60	0 per person?	
	V	No Yes. Fill in the details for each gift.			
		Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
		Person to Whom You Gave the Gift			
			_		
		Number Street			
		City State Zip Code Person's relationship to you	_		
		Person to Whom You Gave the Gift			
		Person to Whom You gave the Gilt			
		Number Street			
		City State Zip Code			
		Person's relationship to you	_		

		First Name Milddle Name Do	cument Page 47 of 73		
14.	With		give any gifts or contributions with a total value of more	e than \$600 to an	y charity?
		No Yes. Fill in the details for each gift or contribution.			
		Gifts with a total value of more than \$600 per person	Describe the gifts	Dates you gave the gifts	Value
		Charity's Name			
		Number Ctreet			
		Number Street City State Zip Code			
Part	6: I	List Certain Losses			
15.		nin 1 year before you filed for bankruptcy or since yo bling?	u filed for bankruptcy, did you lose anything because o	of theft, fire, othe	r disaster, or
	_	No Yes. Fill in the details.			
	_	Describe the property you lost and how the loss occurred	Describe any insurance coverage for the loss Include the amount that insurance has paid. List pending	Date of your loss	Value of property lost
			insurance claims on line 33 of Schedule A/B: Property.		
Part	7:	List Certain Payments or Transfers			
16.	seek	ing bankruptcy or preparing a bankruptcy petition?	anyone else acting on your behalf pay or transfer any p		e you consulted about
	_	de any attorneys, bankruptcy petition preparers, or credit No	counseling agencies for services required in your bankrupto	y.	
		Yes. Fill in the details.			
			Description and value of any property transferred	Date payment or transfer was made	Amount of payment
		Person Who Was Paid			
		Number Street			
		City State Zip Code			
		Email or website address			
		Person Who Made the Payment, if Not You			
		Person Who Was Paid			
		Number Street			
		City State Zip Code			
		Email or website address			
		Person Who Made the Payment, if Not You			

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Deb	otor 1	MontiseCase 16-16740 First Name		d 05#18/16 ocumetht***	Entered 05/1/6 Page 48 of 73	M16 (1k2 k33:	: <u>06 Desc</u>	<u>Main</u>	
17.	you	nin 1 year before you filed for be deal with your creditors or to mot include any payment or transfer	nake payments to you	r creditors?	ng on your behalf pay o	or transfer any p	property to anyor	ne who p	promised to help
	✓	No Yes. Fill in the details.							
				Description and	d value of any property	transferred	Date payment or transfer was made	Amou	nt of payment
		Person Who Was Paid							
		Number Street							
		City State	Zip Code						
18.	ordi: Inclu	nin 2 years before you filed for nary course of your business of ide both outright transfers and transfers that you have already listed of No Yes. Fill in the details.	or financial affairs? nsfers made as security					-	
				Description and property transfe			property or paymets paid in exch		Date transfer was made
		Person Who Received Transfer							
		Number Street							
		City State Person's relationship to you	Zip Code						
		Person Who Received Transfer							
		Number Street							
		City State Person's relationship to you	Zip Code						
19.		nin 10 years before you filed for see are often called asset-protection. No		transfer any prop	perty to a self-settled tru	ıst or similar de	evice of which yo	u are a l	peneficiary?
		Yes. Fill in the details.		Description an	d value of the property	transferred			Date transfer
									was made
		Name of trust							

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First Name Middle Name Filed 05/18/16 Entered 05/18/16 12:33:06 Desc Main Document Page 49 of 73

		3	
Part 8:	List Certain Financial Accounts,	, Instruments, Safe Deposit Boxes, and Storage Units	

20.	or tr Inclu	ansferred?	gs, money mar	ket, or other financi	al account				your name, or for you		
		No Yes. Fill in the deta	ile								
	M	res. Fill in the deta	ilis.		Last 4	digits of account er		Type of a	account or ent	Date account was closed, sold, moved, or transferred	Last balance before closing or transfer
		Bank of America			— xxxx	-8898	Ī,	✓ Ched	cking	1/27/2016	\$ 57.00
		Person Who Was F P.O. Box 25118	Paid				Ī	Savir	ngs		
		Number Street					Ī	Mone	ey market		
								Brok	erage		
		T	EL ZI.	00000				Othe	r		
		Tampa City	Florida State	33622 Zip Code	<u>—</u>						
					V////			7 0h	13		
		Person Who Was I	Paid		— XXXX	-	F	Chec	_		
		Nl Otract			_		L	Savir	igs ey market		
		Number Street							erage		
							F	Othe	•		
		City	State	Zip Code							
		ables? No Yes. Fill in the deta	ils.		Who else	had access to it?			Describe the contents	3	Do you still have it?
		Name of Financial	Institution		Name						☐ No
		Number Street		-	Number	Street					Yes
					City	Ctata	Zin Coa				
					City	State	Zip Coo	ae			
		City	State	Zip Code							
22.	Have	e you stored prope	erty in a stora	ige unit or place o	other than	your home within	1 year be	efore yo	u filed for bankruptcy?	?	
	.7	No									
	Ħ	Yes. Fill in the deta	ils.								
	_				Who else	had access to it?			Describe the contents		Do you still
											have it?
		Name of Storage	Eacility		Name						□ No
											Yes
		Number Street			Number	Street					_
				_	City	State	Zip Cod	de			
		City	Stata		•						
		City	State	Zip Code							

Deb	tor 1	MontiseCase 16-16740 J Doc 1 First Name Middle Name	Filed 05¢1 Docume		ntered 05/1 ge 50 of 73	& ഫ്.6 ഷ 2 :33: <u>06 Desc Maii</u>	<u>1</u>
Part	9:	Identify Property You Hold or Contro	I for Someo	ne Else			
23.		you hold or control any property that someone No Yes. Fill in the details.	e else owns? In	nclude any pro	perty you borro	wed from, are storing for, or hold in tru	st for someone.
	Ц	res. i ili ili tire details.	Where is the	e property?		Describe the contents	Value
		Owner's Name	Number Stre	et		-	
		Number Street				-	
			- 0:	01515	7: 0: 1:	-	
		City State 7in Code	City –	State	Zip Code		
		City State Zip Code					
		Give Details About Environmental In urpose of Part 10, the following definitions apply:	itormation				
	ha in S. or to	nvironmental law means any federal, state, or local azardous or toxic substances, wastes, or material including statutes or regulations controlling the clear ite means any location, facility, or property as defined used to own, operate, or utilize it, including disposazardous material means anything an environment axic substance, hazardous material, pollutant, contain notices, releases, and proceedings that you know any governmental unit notified you that you remain the details. Name of site Number Street	nto the air, land, nup of these sub ed under any env sal sites. tal law defines as aminant, or simila v about, regardles	soil, surface wasterstances, wasterironmental law, a hazardous war term. ss of when they repotentially lia tal unit	ater, groundwater, es, or material. whether you now aste, hazardous soccurred.	or other medium, own, operate, or utilize it	Date of notice
			City	State	Zip Code	-	
		City State Zip Code	_		,		
25.	Hav	e you notified any governmental unit of any re	elease of hazard	dous material?	>		
_0.		No	or mazar		•		
	ш	Yes. Fill in the details.	Governmen	tal unit		Environmental law, if you know it	Date of notice
		Name of site	Governmenta	l unit		-	
		Number Street	Number Stre	et		-	
		City State Zip Code	City	State	Zip Code	-	
		· ·					

Debtor	1	MontiseCase 16-16740 First Name			Entered 05/18 Page 51 of 73	h16 A2:33: <u>06</u>	Desc Main
26. H	av	e you been a party in any judici	al or administrativ	ve proceeding under a	ny environmental law	? Include settlements	and orders.
<u> </u>	1	No					
L		Yes. Fill in the details.		Court or agency		Nature of the case	Status of the
		Coop title		,			case
		Case title		Occurt Name			Pending
				Court Name			On appeal
		Case number		Number Street			Concluded
				City State	Zip Code		
Part 11	:	Give Details About Your	Business or C	onnections to Any	y Business		
27. W	/ith	nin 4 years before you filed for l	bankruptcy, did yo	ou own a business or h	nave any of the follow	ing connections to any	y business?
		A sole proprietor or self-emp			-		
		A member of a limited liabilit		•	•	-ume	
		A partner in a partnership					
		An officer, director, or managed An owner of at least 5% of the	-		1		
	7	No. None of the above applies. Go		edunies of a sorporation	•		
		Yes. Check all that apply above ar		elow for each business.			
				Describe the natu	ure of the business		entification number Do not all Security number or ITIN.
						EIN:	a Security number of Trin.
		Business Name				LIIV.	
		Number Street		Name of account	ant or bookkeeper	Dates busine	ss existed
		City State	Zip Code		ant of bookkeeper	From	То
		City State	Zip Code				
				Describe the natu	ure of the business		entification number Do not al Security number or ITIN.
		Business Name				EIN:	
		Number Street		Name of account	ant or bookkeeper	Dates busine	ss existed
		City State	Zip Code			From	To
				Describe the natu	ure of the business	Employer Ide	entification number Do not
							al Security number or ITIN.
		Business Name		_		EIN:	
		Number Street				Dates busine	ess existed
				Name of account	ant or bookkeeper		
		City State	Zip Code	-		From	To
				<u> </u>			

Debtor		ed 05½68/16 Entered 05/48/16/42:33:06 Desc Main Document Page 52 of 73				
		give a financial statement to anyone about your business? Include all financial institutions,				
∠	No Yes. Fill in the details below.					
	_	Date issued				
	Name	MM/DD/YYYY				
	Number Street	_				
	City State Zip Code	_				
Part 12	Part 12: Sign Below					
and	d correct. I understand that making a false statement	Affairs and any attachments, and I declare under penalty of perjury that the answers are true t, concealing property, or obtaining money or property by fraud in connection with a aprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.				
	Signature of Debtor 1	Signature of Debtor 2				
	Date 5/18/2016	Date				
Dic	Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)? No Yes					
Dic	you pay or agree to pay someone who is not an atto	orney to help you fill out bankruptcy forms?				
✓	No					
	Yes. Name of person	Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).				

	Case 16-1674	0 Doc 1 Filed (75/19/16 Ent	ered 05/18/16 12:33:06	Desc Main		
Fill in this informa	ation to identify your case			1.11.11.12.10/10 12.33.00	DC3C IVIAIII		
Debtor 1	Montise First Name	J Middle Name	Brown Last Name				
Debtor 2 (Spouse, if filing)		Middle Name	Last Name				
	ankruptcy Court for the:	Northern	District of Illinois (State)				
Case number (If known)			. ,		_		
Official F	orm 108				Check if this is an amended filing		
	Official Form 108 Statement of Intention for Individuals Filing Under Chapter 7						
■ creditors have■ you have leasYou must file thi	e claims secured by yo sed personal property a s form with the court w	and the lease has not expir vithin 30 days after you file	ed. your bankruptcy pe	ition or by the date set for the meetir copies to the creditors and lessors yo	•		
•	eople are filing togethe	•	equally responsible for	or supplying correct information.			
Do oo oomulata	and accounts as mass!	bla If mare open is pende	d attack a comprete a	hant to this form. On the top of any	dditional name		

Be as complete and accurate as possible. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known).

Part 1: List Your Creditors Who Have Secured Claims 1. For any creditors that you listed in Part 1 of Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D), fill in the information below. Identify the creditor and the property that is collateral What do you intend to do with the property that Did you claim the property secures a debt? as exempt on Schedule C? No. Creditor's Surrender the property. name: Honor Finance Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: 030 Automobile Retain the property and [explain]: Creditor's Surrender the property. No. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: Surrender the property. No. Creditor's name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a property Reaffirmation Agreement. securing debt: Retain the property and [explain]: No. Creditor's Surrender the property. name: Yes. Retain the property and redeem it. Description of Retain the property and enter into a Reaffirmation Agreement. property securing debt: Retain the property and [explain]:

Debtor Montise Case 16-16740 Doc 1 Filed 09 Documents Do	5/18/16 Entered 05/18/16 12:33:06 Desc Main Brown Page 54 of 3s number (if Cast Name Known)
Part 2: List Your Unexpired Personal Property Leases For any unexpired personal property lease that you listed in Sche information below. Do not list real estate leases. Unexpired leases unexpired personal property lease if the trustee does not assume	edule G: Executory Contracts and Unexpired Leases (Official Form 106G), fill in the sare leases that are still in effect; the lease period has not yet ended. You may assume an
Describe your unexpired personal property leases	Will the lease be assumed?
Lessor's name: Pangea Real Estate	☐ No ✓ Yes
Description of leased property: Landlord	
Lessor's name:	□ No □ Yes
Description of leased property:	
Lessor's name:	☐ No ☐ Yes
Description of leased property:	
Lessor's name:	□ No □ Yes
Description of leased property:	
Lessor's name:	□ No □ Yes
Description of leased property:	
Lessor's name:	☐ No ☐ Yes
Description of leased property:	
Lessor's name:	☐ No ☐ Yes
Description of leased property:	
Part 3: Sign Below	
Under penalty of perjury, I declare that I have indicated my inte that is subject to an unexpired lease.	ention about any property of my estate that secures a debt and any personal property
✗ /s/ Montise Brown	*
Signature of Debtor 1	Signature of Debtor 1
Date 5/18/2016	Date

MM/DD/YYYY

MM/DD/YYYY

B 203 (12/94)

In

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

re	Montise J Brown		Case No.	
-	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE OF	COMPENSATION	OF ATTORNEY FO	R DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and compensation paid to me within on rendered or to be rendered on behavior	e year before the filing of the pe	etition in bankruptcy, or agreed t	o be paid to me, for services
	For legal services, I have agreed to	o accept		\$1,415.0
	Prior to the filing of this statement	I have received		\$0.0
	Balance Due			\$1,415.0
2.	The source of the compensation pa	aid to me was:		
	D ebtor	Other (specify)		
3.	The source of the compensation pa	aid to me is:		
	✓ Debtor	Other (specify)		
4.	I have not agreed to share the members and associates of m	above-disclosed compensation y law firm.	n with any other person unless th	ey are
		law firm. A copy of the agreem	n a other person or persons who ent, together with a list of the na	
5.	In return for the above-disclosed for a. Analysis of the debtor's fina	-	al service for all aspects of the b dvice to the debtor in determining	· · ·

- bankruptcy;
- b. Preparation and filing of any petition, schedules, statements of affairs and plan which may be required;
- c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof;

	Case 16-16740	Doc 1	Filed 05/18/16	Entered 05/18/16 12:33:06	Desc Main
6.	By agreement with the debtor	r(s), the ab	Document ove-disclosed fee doe	Page 56 of 73 s not include the following services:	

	CERTIFICATION					
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.						
5/18/2016	/s/ Elizabeth Placek					
Date	Signature of Attorney					
	Semrad Law Firm					
	Name of law firm					

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B 203 (12/94)

UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re	Montise J Brown		Case No.	
	Debtor			(If known)
			Chapter	Chapter 7
	DISCLOSURE O	F COMPENSATION	OF ATTORNEY FO	R DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) ar compensation paid to me within the compensation paid to		that I am the attorney for the	abovenamed debtor(s) and that
	For legal services, I have agreed	to accept		\$1,415.00
	Prior to the filing of this statemer	at I have received		\$0.00
	Balance Due		ML	\$1,415.00
2.	The source of the compensation p	paid to me was:		\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \
	✓ Debtor	Other (specify)		
3.	The source of the compensation p	paid to me is:		
	Debtor	Other (specify)		
4.	I have not agreed to share the members and associates of r	e above-disclosed compensation v ny law firm.	vith any other person unless the	ey are
	I have agreed to share the ab members or associates of my the people sharing in the com	ove-disclosed compensation with a law firm. A copy of the agreeme pensation, is attached.	a other person or persons who a nt, together with a list of the na	are not mes of
5.	In return for the above-disclosed in a. Analysis of the debtor's final bankruptcy;	ee, I have agreed to render legal ancial situation, and rendering adv	service for all aspects of the barice to the debtor in determining	ankruptcy case, including: whether to file a petition in
	b. Preparation and filing of ar	y petition, schedules, statements	of affairs and plan which may b	pe required;
	c. Representation of the debt	or at the meeting of creditors and	confirmation hearing, and any a	djourned hearings thereof;

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6. By agreement with the debtor(s), the above-disclosed fee does not include the following services:

MB

CERTIFICATION					
I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceedings.					
5/18/2016 /s/ Elizabeth Placek					
Date	Signature of Attorney				
	Semrad Law Firm				
	Name of law firm				

CONTRACT FOR LEGAL SERVICES FOR REPRESENTATION IN A CHAPTER 7 BANKRUPTCY CASE

I do hereby retain the law firm of The Semrad Law Firm, LLC to represent my legal interests solely in a Bankruptcy case filed under Chapter 7 of the United States Bankruptcy Code. I further understand that this representation DOES NOT INCLUDE defending my interests in any adversary proceeding filed against me nor does this representation cover state court proceedings or criminal litigation.

I understand that The Semrad Law Firm, LLC is not going to charge me for time spent prior to the filing of my Chapter 7 case preparing and filing my petition. I also understand that The Semrad Law Firm, LLC may incur costs for such items as credit reports and tax transcripts for which it will not seek reimbursement.

After the bankruptcy case is filed, I understand that I will be presented with a second retainer agreement to pay The Semrad Law Firm, LLC \$1415.00 attorney fees plus any necessary postpetition costs to represent my interests including preparation and amendment, if necessary, of schedules; preparation and attendance of the Section 341 Meeting of Creditors; review and attendance, if necessary, to motions for stay relief; review of any redemption agreements; review of any reaffirmation agreements; case administration and monitoring, motions to reopen, if necessary, as well as a post discharge review of my credit report to ensure accurate reporting. I further understand and agree that additional professional legal services will result in additional fees that are due The Semrad Law Firm, LLC. Some of the additional services and fees are as follows:

Representation in an Adversary Proceeding. \$350.00/hr.
Adding additional bills \$30.00
Motion to Reopen and Avoid Lien \$1000.00

I have been presented to two options regarding the filing fees of \$335.00 payable to the Bankruptcy Court. I have elected to either,

- 1. Pay the costs directly to the bankruptcy court either all at once, or apply to pay these costs in installments; or
- 1. Request that the firm pay these costs on my behalf after filing for which it will seek reimbursement from me.

I understand that once my bankruptcy is filed, I will not be legally obligated to pay any fees to The Semrad Law Firm, LLC. If any fees are owed to The Semrad Law Firm, LLC and not paid as of the filing of the bankruptcy, they will be discharged in the bankruptcy and may not be collected by The Semrad Law Firm, LLC or it assignees. After my bankruptcy is filed, I may sign a second retainer agreement promising to pay fees for the remainder of my representation in consideration of services to be performed by The Semrad Law Firm, LLC after the filing of my bankruptcy. I understand that I will be under no obligation to do so and can refuse to sign such an agreement. However, The Semrad Law Firm, LLC reserves the right to withdraw from my representation in the event that I do not sign a second retainer within 10 days after the filing of my case. I have been advised that I have a right to consult other counsel before I sign

Montise Brown

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the second retainer. Further, if I do not wish for The Semrad Law Firm, LLC to represent me, I always have the right to seek any other legal counsel.

I further understand that the fee to be paid pursuant to the terms of this Contract is a flat fee, and that this fee shall immediately become the property of The Semrad Law Firm, LLC, in exchange for a commitment by The Semrad Law Firm, LLC, to provide the legal services described above. Said funds will be deposited into the main bank account owned by The Semrad Law Firm, LLC, and will be used for general expenses of the firm.

As The Semrad Law Firm, LLC has duties to me as its client, I likewise have responsibilities. I agree to fully cooperate with The Semrad Law Firm, LLC This includes, but is not limited to, providing The Semrad Law Firm, LLC with all information necessary and related to my bankruptcy case. In addition, I must attend all scheduled Court hearings and meetings.

I understand that I am to notify my creditors of my bankruptcy case once my Chapter 7 case is filed. I understand that The Semrad Law Firm, LLC is not liable or responsible for any illegal collection actions taken by my creditors once my case is filed.

I also understand that, if I am filing a joint case, the use of the personal pronouns "I", "me" or "my" are binding upon each signatory individually. I also understand that the laws of the State of Illinois are applicable to enforcement of this contract. Moreover, any change in this Contract is null and void unless it is in writing and signed by The Semrad Law Firm, LLC or an agent thereof.

Date: 5/18/2016

Chem _

Client

Attorney

Montise Brown

1.2.1. My 4

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy,

and

Your debts are primarily consumer debts.

Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of the Bankruptcy Code:

- Chapter 7 Liquidation
- Chapter 11 Reorganization
- Chapter 12 Voluntary repayment plan for family farmers or fishermen
- Chapter 13 Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapter 7: Liquidation

	\$245	filing fee
	\$75	administrative fee
+	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

- most taxes;
- most student loans;
- domestic support and property settlement obligations;

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- most fines, penalties, forfeitures, and criminal restitution obligations; and
- certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

- fraud or theft;
- fraud or defalcation while acting in breach of fiduciary capacity;
- intentional injuries that you inflicted; and
- death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form — the Chapter 7 Means Test Calculation (Official Form 122A-2). The calculations on the form— sometimes called the Means Test —deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

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your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

	\$1,167	filing fee
+	\$550	administrative fee
	\$1,717	total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

- domestic support obligations,
- most student loans,
- certain taxes,
- debts for fraud or theft,
- debts for fraud or defalcation while acting in a fiduciary capacity,
- most criminal fines and restitution obligations,
- certain debts that are not listed in your bankruptcy papers,
- certain debts for acts that caused death or personal injury, and
- certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court

For more information about the documents and their deadlines, go to:

http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

- If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.
- All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together - called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from:

http://www.justice.gov/ust/eo/hapcpa/ccde/cc_approved.html

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/BankruptcyResources/ApprovedCredit 20AndDebtCounselors.aspx

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list.

Case 16-16740 Doc 1 Filed 05/18/16 Entered 05/18/16 12:33:06 Desc Main UNITED STATES BANKBURGE OF POURT Northern District of Illinois

In re:	Brown, Montise J	Case No		
_	Debtor(s)	0435 1.15.		
		Chapter.	Chapter7	
	VERIFICATIO	N OF CREDITOR MATE	RIX	
	The above named Debtors hereby verify that the a	ttached list of creditors is true ar	d correct to the best of their know	vledge.
Date:	5/18/2016	/s/ Brown, Montise J		
Date:	3/18/2016	Brown, Montise J		

Signature of Debtor

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IL DEPT OF HEALTHCARE 100 South Grand Ave E Springfield , IL 62704 LISA

Honor Finance PO Box 1817 Evanston , IL 60204 USA

COMMONWEALTH FINANCIAL 245 MAIN ST DICKSON CITY , PA 18519 USA

AMSHER COLLECTION SERV 600 BEACON PKWY W STE 30 BIRMINGHAM , AL 35209 USA

Dish Network 9601 S Meridian Blvd Englewood , CO 80112 USA

I C SYSTEM INC PO BOX 64378 SAINT PAUL , MN 55164 USA

RCN 33 N LaSalle, Suite 1650 Chicago , IL 60602 USA

CREDIT MANAGEMENT LP 4200 INTERNATIONAL PKWY CARROLLTON , TX 75007 USA

PEOPLES ENGY 200 EAST RANDOLPH CHICAGO , IL 60601 USA

Illinois Dept of Revenue Illinois Department of Revenue P.O. Box 64338 Chicago , IL 60664 USA

Illinois Department of Employment Security 33 S State St 9th Floor Chicago , IL 60603 USA

check N. Go 7755 Montgomery Road # Suite 400 Cincinnati , OH 45236 USA Speedy Cash 1931 N. Mannheim Rd Melrose Park , IL 60160 USA

Speedy Loan 2850 Belvidere Rd Waukegan , IL 60085 USA

Advocate Christ Hospital of Illinois 4440 W 95th St Oak Lawn , IL 60453 USA

John H. Stroger, Jr. Hospital of Cook County PO Box 70121 Chicago , IL 60673 USA

Stroger Hospital of Cook County 1900 W Polk Street Chicago , IL 60612 USA

Comcast 11621 E. Marginal Way # 5 Bankruptcy Dept Seattle , WA 98168 USA

Sprint P.O. Box 219554 Kansas City , MO 64121 USA

US Cellular Dept 0205 Palatine , IL 60055 USA

STUDENT LOAN FINANCE C PO BOX 7860 MADISON , WI 53707 USA

BANK OF AMERICA POB 17054 WILMINGTON , DE 19884 USA

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Debtor 1 Montise First Name	J Add and the	Brown	Case number (if known)	
X6000000000000000000000000000000000000	Middle Name uestions for Reporting Purpos	Last Name	-	
16. What kind of debts do you have?	16a. Are your debts primaril as "incurred by an individed in No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primaril obtain money for a busin investment. No. Go to line 16c. Yes. Go to line 17. 16c. State the type of debts your debts primaril obtain.	ly consumer debts? (dual primarily for a per dual primarily for a per ly business debts? Business or investment or the	sonal, family, or house usiness debts are deb hrough the operation o	ehold purpose." Is that you incurred to of the business or
17. Are you filing under Chapter 7? Do you estimate that after any exempt property is excluded and administrative expenses are paid that funds will be available for distribution to unsecured creditors?	☑ No. t ☐ Yes.		y exempt property is exclude d creditors?	ed and administrative expenses are
18. How many creditors do you estimate that you owe?	☑ 1-49 ☐ 50-99 ☐ 100-199 ☐ 200-999	1,000-5,000 5,001-10,000 10,001-25,000		25,001-50,000 50,001-100,000 More than 100,000
19. How much do you estimate your assets to be worth?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$ \$10,000,001-\$ \$50,000,001-\$ \$100,000,001	550 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
20. How much do you estimate your liabilities to be?	✓ \$0-\$50,000 ☐ \$50,001-\$100,000 ☐ \$100,001-\$500,000 ☐ \$500,001-\$1 million	\$1,000,001-\$1 \$10,000,001-\$ \$50,000,001-\$ \$100,000,001	550 million	\$500,000,001-\$1 billion \$1,000,000,001-\$10 billion \$10,000,000,001-\$50 billion More than \$50 billion
Pari7 Sign Below				
	I have examined this petition, a and correct. If I have chosen to file under Chor 13 of title 11, United States Coroceed under Chapter 7. If no attorney represents me an fill out this document, I have obtour a few proceed in accordance with a large transfer of both 18 U.S.C. §§ 152, 1341. Is/ Montise Brown Signature of Debtor Executed on 518/2016 MM / DD /	napter 7, I am aware the Code. I understand the d I did not pay or agretained and read the no ith the chapter of title 1 tement, concealing proper can result in fines to 1519, and 3571.	nat I may proceed, if e relief available under e to pay someone who tice required by 11 U.S 1, United States Code	ligible, under Chapter 7, 11,12, each chapter, and I choose to b is not an attorney to help me S.C. § 342(b). b, specified in this petition. Inney or property by fraud in prisonment for up to 20 years,

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Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.						
First Name	Fill in this infor	mation to identify your case				
First Name	Debtor 1	Montise	J	Proves		
Destor 2 (Spouse, if filing) First Name United States Bankruptcy Court for the: Northern District of Illinois (State) Case number (It known) Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 It we married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, District Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Attach Bankruptcy Petition Preparer's Notice, Daclaration, and Signature (Official Form 119). Under penalty of perjány, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.						
Unided States Bankruptcy Court for the: Northern District of Illinois Case number (If known) Official Form 106Dec Declaration About an Individual Debtor's Schedules 12/15 If two married people are filing together, both are equally responsible for supplying correct information. Our must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or roperty by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.						
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f two married people are filing together, both are equally responsible for supplying correct information. You must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or 519, and 3571. Part 1: Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	Declarat	tion About an	Individual De	btor's Schedule	s	ADME
Vou must file this form whenever you file bankruptcy schedules or amended schedules. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 519, and 3571. Pontal Sign Below Did you pay or agree to pay someone who is NOT an attorney to help you fill out bankruptcy forms? No Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.						12/10
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Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	Did you pa	ay or agree to pay someon	ne who is NOT an attorney	to help you fill out has known	4	
Yes. Name of person Attach Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119). Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	gineway		in the lotter and accorney	to neip you hit out pankruptcy	torms?	
Under penalty of perjury, I declare that I have read the summary and schedules filed with this declaration and that they are true and correct.	No					
Is/ Montise Brown	Yes, N	lame of person		Attach Bankruptcy Petition Signature (Official Form 1	n Preparer's Notice, Declaration, and 19).	
Is/ Montise Brown						
	Under penathat they a	alty of perjury, I declare the true and correct.	nat I have read the summar	y and schedules filed with this	declaration and	
Signature of Debto 1			115		PA.	
Signature of Debtor 2 Date 5/18/2016		/ \				

MM/DD/YYYY

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Debtor 1	Montise First Name	J Middle Name	Brown Last Name	Case number (if known)
28. Wit cred	hin 2 years before you filed (ditors, or other parties.	or bankruptcy, did yo		ent to anyone about your business? Include all financial institutions,
S	No Yes. Fill in the details below.			
			Date issued	
	Name		MM/DD/YYYY	
	Number Street		Non-returne	
	City State	7		
		Zip Code		
Part 12:	Sign Below			
I have and c bankr	ruptcy case can result in fine	who \$250,000, or in	Affairs and any attachme t, concealing property, or prisonment for up to 20 y	nts, and I declare under penalty of perjury that the answers are true obtaining money or property by fraud in connection with a rears, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.
	Signature of Debte	71		Signature of Debtor 2
	Date 5/18/2016/	and the second		Date
Did yo	° /	Your Statement of F	inancial Affairs for Individ	duals Filing for Bankruptcy (Official Form 107)?
Did vo	U pay or agree to pay some	i one who ie not an atta	rmout to landa constitution	
V N	ou pay or agree to pay somed	OHE HIS TON STORE STORE	mey to neip you till out ba	ankruptcy forms?
Remode party	es. Name of person	No. one of a second control of		Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

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Debtor Montise	J	Brown	Case number (#
1 First Name	Middle Name	Last Name	known)
Pativa List Your Unexpired	d Personal Property Lea	ases	
For any unexpired personal pro	perfy lease that you listed in al estate leases. Unexpired to	Schedule G: Executory Co	ontracts and Unexpired Leases (Official Form 106G), fill in the till in effect; the lease period has not yet ended. You may assume an (2).
Describe your unexpired pe	rsonal property leases		Will the lease be assumed?
Lessor's name: Pangea Rea			No ✓ Yes
Description of leased property: Landlord			Longit
Lessor's name:			No Yes
Description of leased property:			
Lessor's name:			No Yes
Description of leased property:			Seeds
Lessor's name:			No Yes
Description of leased property:			
Lessor's name:			☐ No ☐ Yes
Description of leased property:			
Lessor's name;			No Yes .
Description of leased property:			
Lessor's name;			No Yes
Description of leased property:			
aris Sign Below	and a salah mengangan pertambah pertambah pertambah pertambah pertambah pertambah pertambah pertambah pertambah I	eta karaman karaman kanan araman karaman karaman karaman karaman karaman karaman karaman karaman karaman karam Karaman karaman karama	$1326^{-\alpha}\cos(\theta)\cos(\theta)\cos(\theta)\cos(\theta)\cos(\theta)\cos(\theta)\cos(\theta)\cos(\theta)\cos(\theta)\cos(\theta)$
	are that I have indicated my i	ntention about any proper	ty of my estate that secures a debt and any personal property
Is/ Montise Brown Signature of Debtør	nte Pern	* *	
/ \			ure of Debtor 1
Date <u>5/18/20/6</u> <u>MM/D/D/YYYY</u>		Date	MM/DD/YYYY

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UNITED STATES BANKRUPTCY COURT

Northern District of Illinois

In re: _	Brown, Montise J Debtor(s)	Case No.	
		Chapter. Chapter7	_
	VERIFICA	TION OF CREDITOR MATRIX	
	The above named Debtors hereby verify that	the attached list of creditors is true and correct to the best of their knowledge.	
ate:	5/18/2016	/s/ Brown, Montise / Marker / Brown, Montise J/ Signature of Deblor	STATE OF THE PARTY
		/ '	

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Debtor 1		J	Brown	Case number (if known)		
	First Name	Middle Name	Last Name	Column A Debtor 1	Column B Debtor 2 or non-filing spouse	:
Do no	nployment compensation ot enter the amount if you contend to al Security Act. Instead, list it here:	hat the amount receive	d was a benefit under the	\$0.00	mon-ming spouse	
-	ou		\$0.00			
-	our spouse ion or retirement income. Do no		\$0.00 eceived that was a	\$0.00		
benet	fit under the Social Security Act.	·		90.00	***************************************	
Do no receiv	me from all other sources not lot include any benefits received unched as a victim of a war crime, a cristic terrorism. If necessary, list otherwork.	ter the Social Security me against humanity.	Act or payments or international or			
		******		400.00	***************************************	
Total	amounts from separate pages, if ar	ny.		+\$0.00	+	1
11. Calc	culate your total current monthly umn. Then add the total for Column	y income. Add lines 2 n A to the total for Colu	through 10 for each mn B.	\$2,074.24 +		\$2,074.24 Total current
Part 2:	Determine Whether the M	eans Test Applie	s to You			monthly income
Anneador Nacres of Street	ulate your current monthly inco				**************************************	**************************************
12a. 0	Copy your total current monthly inco	ome from line 11.	**** *** ***	Copy lin	e 11 here →	\$2,074.24
	Multiply by 12 (the number of mont	hs in a year).				X 12
12b. 7	The result is your annual income fo	r this part of the form.			12b.	<u>\$24,890.88</u>
13 Calcu	late the median family income t	hat applies to you. F	ollow these steps:			
	the state in which you live.		Illinois			
Fill in	the number of people in your house	ehold	7			
	. , ,				40	
	the median family income for your d a list of applicable median income			concrete	13.	\$112,121.00
instru	ctions for this form. This list may als do the lines compare?	so be available at the b	ankruptcy clerk's office.	separate		
	✓ Line 12b is less than or equal to Go to Part 3.	ine 13. On the top of	page 1, check box 1, There	is no presumption of abuse.		
	Line 12b is more than line 13. C Go to Part 3 and fill out Form 1.	On the top of page 1, ch			122A-2.	
Part 3:	Sign Below					
By si	igning here, I declare under penalty	of perjury that the info	rmation on this statement ar	d in any attachments is true and	correct.	er e
×	/s/ Montise Brown Men	tople	×			
Š	Signature of Debtor 1		Sig	nature of Debtor 2		•
[.	Date 5/18/2016		Dat	e 5/18/2016		
	MM/DD/YYY			MM/DD/YYYY		
lf y	ou checked line 14a, do NOT fill o	ut or file Form 122A-2.				
If y	ou checked line 14b, fill out Form	122A-2 and file it with t	his form.			